Fill in this information to identify your ca	ase:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name				
	Write the name that is on your government-issued picture	Jeffrey First Name			
	identification (for example, your driver's license or passport).	Kyle Middle Name	Ann Middle Name		
	passporty.	Clinkscales	Clinkscales		
	Bring your picture identification to your meeting	Last Name	Last Name		
,	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)		
2.	All other names you				
	have used in the last 8 years	First Name	First Name		
	Include your married or	Middle Name	Middle Name		
1	maiden names.	Last Name	Last Name		
	Only the last 4 digits of your Social Security	xxx - xx - <u>7</u> <u>8</u> <u>7</u> <u>3</u>	xxx - xx - <u>9</u> <u>8</u> <u>4</u> <u>6</u>		
	number or federal Individual Taxpayer	OR	OR		
	Identification number	9xx - xx -	9xx - xx -		

(ITIN)

		Jeffrey Kyle Clinks Jennifer Ann Clink				se number (if knowr	n)
			About Debtor 1	l:		About Debtor 2 (Spouse Only in a Joint Case):
and Emp			✓ I have not	used any business	names or EINs.	✓ I have not us	sed any business names or EINs.
	cation Numbers ou have used in 8 years	Business name			Business name		
	Include trade names and		Business name			Business name	
	doing bi	usiness as names	Business name			Business name	
			EIN			EIN	
			EIN			EIN —	
5.	Where y	ou live				If Debtor 2 lives	at a different address:
			141 Feedlot F	Road			
			Number Street			Number Street	
			Aledo	тх	76008		
			City	State	ZIP Code	City	State ZIP Code
			Parker			Country	
			County			County	
			the one above,	address is differe fill it in here. Not any notices to you a s.	e that the	from yours, fill it	ling address is different in here. Note that the court ces to you at this mailing
			Number Street			Number Street	
			P.O. Box			P.O. Box	
			City	State	ZIP Code	City	State ZIP Code
6.		u are choosing trict to file for	Check one:			Check one:	
	bankru		petition, I h	ast 180 days before nave lived in this di other district.	-	<u></u>	t 180 days before filing this ve lived in this district longer other district.
				ther reason. Expla S.C. § 1408.)	in.	I have anoth (See 28 U.S.	er reason. Explain. .C. § 1408.)
P	art 2:	Tell the Court A	About Your Bank	ruptcy Case			
7.	Bankru	apter of the ptcy Code you				ce Required by 11 Lage 1 and check the	J.S.C. § 342(b) for Individuals Filing appropriate box.
	are cho under	osing to file	Chapter 7				
			Chapter 11				
			Chapter 12				
			Chapter 13				

	Debtor 1 Jeffrey Kyle Clinksca Debtor 2 Jennifer Ann Clinksc					Ca	ase numl	ber (if known) _			
8.	How you w	v you will pay the fee		court for n	more details about h	now you may pay. k, or money order.	Typically If your	v, if you are pay attorney is subn	e clerk's office in your local ing the fee yourself, you may nitting your payment on your ted address.		
					ed to pay the fee in installments. If you choose this option, sign and attach the Application for viduals to Pay The Filing Fee in Installments (Official Form 103A).						
				By law, a j than 150% fee in insta	judge may, but is now of the official pove	ot required to, waiverty line that applie noose this option, y	e your fees to your	ee, and may do r family size and fill out the Appl	ou are filing for Chapter 7. so only if your income is less d you are unable to pay the ication to Have the Chapter 7		
bankru	Have you fi			No							
	last 8 years			Yes.							
			Dist	ict			When		Case number		
		Dist	ıct			When _	MM / DD / YYYY	Case number			
			Dist	ict					Case number		
10.	Are any ba	nkruptcy ling or being		No			N	MM / DD / YYYY			
	filed by a s	pouse who is		Yes.							
	not filing the	is case with a business	Deb	tor				Relationshi	p to you		
	partner, or		Dist	ict					Case number,		
	affiliate?						N	MM / DD / YYYY	if known		
			Deb	or				Relationshi	p to you		
			Dist	ict			When		Case number,		
							N	MM / DD / YYYY	if known		
11.	Do you ren residence?	•			o to line 12. Is your landlord obta	ained an eviction ju	ıdgment	against you?			
								tion Judgment A	Against You (Form 101A)		

	tor 1 tor 2	Jeffrey Kyle Clinks Jennifer Ann Clinks				Case	number (if known)		
P	art 3:	Report About Ar	ıy Bı	ısine	sses You Own as a	a Sole Proprietor			
12.	-	a sole proprietor ull- or part-time ss?			Go to Part 4. Name and location of b	usiness			
	busines individu separate	roprietorship is a s you operate as an al, and is not a e legal entity such as ration, partnership, or			Name of business, if any Number Street				
	sole pro	ave more than one prietorship, use a e sheet and attach it etition.			Single Asset Rea Stockbroker (as c	ness (as defined in 11 I Estate (as defined in defined in 11 U.S.C. § er (as defined in 11 U.S	U.S.C. § 101(27A)) 11 U.S.C. § 101(51B 101(53A))	ZIP Co	ode
13.	Chapte Bankru are you	filing under 11 of the ptcy Code and a <i>small business</i>	can mos	set ap	filing under Chapter 11, propriate deadlines. If y nt balance sheet, statem f these documents do no	you indicate that you a nent of operations, cas	re a small business on the statement, and	debtor, you d federal ir	nust attach your ncome tax return
	debtor?		$ \overline{\mathbf{V}} $	No.	I am not filing under C	hapter 11.			
		efinition of small s debtor, see		No.	I am filing under Chapt the Bankruptcy Code.	ter 11, but I am NOT a	small business debto	or accordii	ng to the definition in
	11 U.S.C. § 101(51D).			Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
P	art 4:	Report If You Ov	vn o	r Hav	e Any Hazardous F	Property or Any P	roperty That Ne	eds Imn	nediate Attention
14.	propert alleged immine	own or have any y that poses or is to pose a threat of nt and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?				If immediate attention	is needed, why is it ne	eded?		
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number Street			
						City		State	ZIP Code

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

☐ I received a briefing from an approved cr

About Debtor 1:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

credit counseling because of:						
☐ Incapacity.	I have a mental illness or a menta					
	deficiency that makes me					

☐ I am not required to receive a briefing about

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Jeffrey Kyle Clinkson Debtor 2 Jennifer Ann Clinks			s			Case number (if	know	n)		
Р	art 6: Answer These 0	Quest	ions	for Reporting	Purpos	ses				
16.	What kind of debts do you have?	16a		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.						
		16b		Are your debts primarily business debts? Business debts are debts that you incur money for a business or investment or through the operation of the business or invest No. Go to line 16c. Yes. Go to line 17.						
		16c	Sta	te the type of debts	s you owe	e that are not consumer or bu	sines	s debts.		
17.	Are you filing under Chapter 7?		No.	I am not filing und	der Chap	oter 7. Go to line 18.				
	Do you estimate that after any exempt property is	\square	Yes.	•			-	xempt property is excluded and to distribute to unsecured creditors?		
	excluded and administrative expenses			☑ No						
	are paid that funds will be available for distribution to unsecured creditors?			Yes						
18.	How many creditors do		1-49			1,000-5,000		25,001-50,000		
	you estimate that you owe?		50-99 100-7 200-9	199		5,001-10,000 10,001-25,000		50,001-100,000 More than 100,000		
19.	How much do you estimate your assets to be worth?		\$50,0 \$100	50,000 001-\$100,000 ,001-\$500,000 ,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.	How much do you estimate your liabilities to be?		\$50,0 \$100	50,000 001-\$100,000 ,001-\$500,000 ,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		

Debtor 1 Debtor 2	Jeffrey Kyle Clinks Jennifer Ann Clink		Case number (if known)				
Part 7:	Sign Below						
For you		I have examined this petition, and I declare and correct.	under penalty of perjury that the information provided is true				
		•	m aware that I may proceed, if eligible, under Chapter 7, 11, 12, erstand the relief available under each chapter, and I choose to				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
			cealing property, or obtaining money or property by fraud in all in fines up to \$250,000, or imprisonment for up to 20 years, 13571.				
		X /s/ Jeffrey Kyle Clinkscales	X /s/ Jennifer Ann Clinkscales				
		Jeffrey Kyle Clinkscales, Debtor 1	Jennifer Ann Clinkscales, Debtor 2				
		Executed on 08/21/2019	Executed on 08/21/2019				

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Jeffrey Kyle Clink Debtor 2 Jennifer Ann Clin		Case number (if know	wn)					
For your attorney, if you are represented by one	eligibility to proceed under Chapter 7,	the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about igibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the lief available under each chapter for which the person is eligible. I also certify that I have delivered to						
If you are not represented by an attorney, you do not need to file this page.	the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.							
	X /s/ Lindsay D Steele Signature of Attorney for Debtor	Date	08/21/2019 MM / DD / YYYY					
	Lindsay D Steele							
	Printed name Steele Law Firm, PLLC							
	Firm Name							
	3629 Lovell Avenue Number Street	_						
	Suite 100							
	Fort Worth	тх	76107					
	City	State	ZIP Code					
	Contact phone (682) 231-0909	Email address Istee	le@steelebankruptcy.com					
	24070673							
	Bar number	State						

Fill in this inf	loffroy	Kulo	Clinkecolos		
Debtor 1	Jeffrey First Name	Kyle Middle Name	Clinkscales Last Name	-	
Debtor 2	Jennifer	Ann	Clinkscales		
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Ba	inkruptcy Court fo	r the: NORTHERN Γ	DISTRICT OF TEXAS	_	
Case number				│ □ Check	c if this is an
(if known)				—	ded filing
Official Form	1061/B				
Official Form Schedule A		v			12/15
1. Do you own	or have any lega to Part 2.	ıl or equitable interes	ing, Land, or Other Rea	al Estate You Own or Have	e an Interest In
1. Do you own	or have any lega to Part 2. here is the propert	ty? What is to Check all	st in any residence, building the property? I that apply.	g, land, or similar property?	nims or exemptions. Put th nims on <i>Schedule D:</i>
I. Do you own No. Go Yes. Wh 1.1. 141 Feed Lot Ro	or have any lega to Part 2. here is the propert	ty? What is to Check all Single Duple	st in any residence, building	g, land, or similar property? Do not deduct secured cla amount of any secured cla	nims or exemptions. Put th nims on <i>Schedule D:</i>
1. Do you own No. Go Yes. Wh 1.1. 141 Feed Lot Ro Street address, if avail	or have any lega to Part 2. here is the propert oad lable, or other descrip	ty? What is the Check all I Single I Duple I Cond	the property? I that apply. le-family home ex or multi-unit building dominium or cooperative ufactured or mobile home	p, land, or similar property? Do not deduct secured cla amount of any secured cla Creditors Who Have Clain Current value of the	nims or exemptions. Put th aims on <i>Schedule D:</i> ans Secured by Property. Current value of the
1. Do you own No. Go Yes. Wh 1.1. 141 Feed Lot Ro Street address, if avail	or have any lega to Part 2. here is the propert oad lable, or other descrip	ty? What is the Check all Single Cond Manuer Code Investigation Investi	the property? I that apply. Ile-family home ex or multi-unit building dominium or cooperative ufactured or mobile home distrement property eshare	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain Current value of the entire property?	nims or exemptions. Put the name on Schedule D: ns Secured by Property. Current value of the portion you own? \$0.00 Dour ownership ple, tenancy by the
1. Do you own No. Go Yes. Wh 1.1. 141 Feed Lot Ro Street address, if avail	or have any lega to Part 2. here is the propert oad lable, or other descrip	ty? What is the Check all Single Cond Manuel Code Investigation Investigation Cother	the property? I that apply. Ile-family home ex or multi-unit building dominium or cooperative ufactured or mobile home stment property eshare	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain Current value of the entire property? \$0.00 Describe the nature of your interest (such as fee sime entireties, or a life estate the sime continuous cont	nims or exemptions. Put the name on Schedule D: ns Secured by Property. Current value of the portion you own? \$0.00 Dour ownership ple, tenancy by the
1. Do you own No. Go Yes. Wh 1.1. 141 Feed Lot Ro Street address, if avail	or have any lega to Part 2. here is the propert oad lable, or other descrip TX 76 State ZIF	ty? What is the Check all Single Cond Manuel Code Investigation Investigation Cother	the property? I that apply. Ile-family home ex or multi-unit building dominium or cooperative ufactured or mobile home distinent property eshare er	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain Current value of the entire property? \$0.00 Describe the nature of your interest (such as fee sime entireties, or a life estate the sime continuous cont	nims or exemptions. Put the name on Schedule D: ns Secured by Property. Current value of the portion you own? \$0.00 Dour ownership ple, tenancy by the
1. Do you own No. Go Yes. Wh 1.1. 141 Feed Lot Ro Street address, if avail	or have any lega to Part 2. here is the propert oad lable, or other descrip TX 76 State ZIF	ty? What is the Check all Single Cond Manual Code Investigated Times Check on Debto Debto	the property? I that apply. Ile-family home ex or multi-unit building dominium or cooperative ufactured or mobile home distinent property eshare er	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain Current value of the entire property? \$0.00 Describe the nature of your interest (such as fee sime entireties, or a life estate Fee Simple Check if this is comme (see instructions)	nims or exemptions. Put the nims on Schedule D: ns Secured by Property. Current value of the portion you own? \$0.00 Dour ownership pple, tenancy by the experiments of the policy of the ple, if known.

Debtor Debtor	,	Kyle Clinkscales r Ann Clinkscales	Ca:	se number (if known)	
Part	2: Descr	ibe Your Vehicles			
you ow	n that someone	else drives. If you leas	e interest in any vehicles, whether they are a vehicle, also report it on Schedule G: Exe	_	-
] No		,		
3.1. Make:		Ford	Who has an interest in the property? Check one.	Do not deduct secured claim amount of any secured claim Creditors Who Have Claim	ims on Schedule D:
Model: Year: Approx	imate mileage:	2019 4,500	☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	-	(approx. 4,500	Check if this is community property (see instructions)	· ,	
3.2. Make: Model:		Buick Enclave	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured claim amount of any secured claim Creditors Who Have Claim	ims on Schedule D:
Year:	imate mileage:	2009	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property? \$4,200.00	Current value of the portion you own? \$4,200.00
		e (approx. 165,000	Check if this is community property (see instructions)		Ψ4,200.00
4. W	latercraft, aircr xamples: Boats		s and other recreational vehicles, other vehicle sal watercraft, fishing vessels, snowmobiles, n		
			own for all of your entries from Part 2, incl		\$34,200.00
Part	3: Descr	ibe Your Personal	and Household Items		
Do yoι	u own or have a	any legal or equitable i	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	xamples: Major	ls and furnishings appliances, furniture, lir	nens, china, kitchenware		
<u> </u>	.	Kitchen Furnis Bedroom #1 Fu	rnishings: \$300.00 rnishings: \$200.00 ngs: \$300.00 \$300.00 nt: \$100.00		\$1,900.00

	tor 1 tor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
7.	Electro Exampl	nics es: Televisions and radios; audio, vide	eo, stereo, and digital equipment; computers, printers, scanners; es including cell phones, cameras, media players, games	
	✓ No ☐ Yes	s. Describe	oo maaang oo pronon, camaraa, maala playore, gamee	
8.			prints, or other artwork; books, pictures, or other art objects; ctions; other collections, memorabilia, collectibles	
	✓ No ☐ Yes	s. Describe		
9.	Exampl	nent for sports and hobbies es: Sports, photographic, exercise, and canoes and kayaks; carpentry tools	d other hobby equipment; bicycles, pool tables, golf clubs, skis; s; musical instruments	
	✓ No ☐ Yes	s. Describe		
10.	Firearm Example No	ns es: Pistols, rifles, shotguns, ammunitio	on, and related equipment	
44	Yes	s. Describe		
11.	Example No	es: Everyday clothes, furs, leather coat	ats, designer wear, shoes, accessories	
	∀ Yes	Mr. Clinkscales Clo Mrs. Clinkscales Clo Daughter Clothing:	othing & Accessories: \$600.00	\$1,400.00
12.	Jewelry Example		, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	☐ No ✓ Yes	Wedding Bands: \$3 Watch: \$200.00 Earrings: \$100.00	3,000.00	\$3,600.00
		Ring: \$200.00 Costume Jewelry: \$	\$100.00	
13.	Exampl	m animals es: Dogs, cats, birds, horses		
	☐ No ✓ Yes	s. Describe 3 Cats		\$150.00
14.	did not		ou did not already list, including any health aids you	
		s. Give specific		
15.			om Part 3, including any entries for pages you have	\$7,050.00

	tor 1 tor 2	Jeffrey Kyle Clinks Jennifer Ann Clinks			Case number (if known)	
P	art 4:	Describe Your F	inancial A	ssets		
Do	you own	or have any legal or e	equitable inte	erest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Exampl ✓ No	es: Money you have in petition	your wallet, i	n your home, in a safe deposit box, and	d on hand when you file your	
	<u> </u>	5			Cash:	··
17.	•		and other sin	ncial accounts; certificates of deposit; s nilar institutions. If you have multiple a		
	□ No ✓ Yes		Institu	ution name:		
	17	.1. Checking accoun	BBV	king account A Compass No: xxxxxxx628		\$1,202.27
18.		mutual funds, or publes: Bond funds, investi	-	tocks s with brokerage firms, money market a	accounts	
	✓ No ☐ Yes	Ins	stitution or iss	uer name:		
19.	an inte	blicly traded stock and est in an LLC, partner		n incorporated and unincorporated b int venture	usinesses, including	
	info	s. Give specific rmation about m Na	ame of entity:		% of ownership:	
20.	Negotia	ble instruments include	personal che	ner negotiable and non-negotiable in ecks, cashiers' checks, promissory note annot transfer to someone by signing o	es, and money orders.	
	info	s. Give specific rmation about m Iss	suer name:			
21.		nent or pension accou es: Interests in IRA, EF profit-sharing plans	RISA, Keogh,	401(k), 403(b), thrift savings accounts	, or other pension or	
		s. List each ount separately. Type	e of account:	Institution name:		

	bebtor 1 Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales Case number (if known)					
22.	Securit Your sh Example compar					
	_	S				
23.	☑ No		specific periodic payment of money to you, either for life Issuer name and description:	e or for a number of yea	ars)	
24.	Interes		RA, in an account in a qualified ABLE program, or un	der a qualified state t	uition pro	ogram.
	✓ No ☐ Yes	5	Institution name and description. Separately file the rec	ords of any interests.	11 U.S.C.	§ 521(c)
25.	powers	equitable or future exercisable for you	interests in property (other than anything listed in lir ur benefit	ne 1), and rights or		
		s. Give specific				
26.			marks, trade secrets, and other intellectual property; names, websites, proceeds from royalties and licensing	agreements		
		s. Give specific				
27.	License	es, franchises, and o	other general intangibles exclusive licenses, cooperative association holdings, li	quor licenses, professi	onal licen	ses
		s. Give specific				
Mor		operty owed to you	?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you				
	abo you	s. Give specific inform out them, including what already filed the retulation of the tax years	nether urns		Federal State: Local:	:
29.	Exampl	support es: Past due or lump	sum alimony, spousal support, child support, maintena	nce, divorce settlemen	t, property	v settlement
	✓ No ☐ Yes	s. Give specific infor	mation	Alimony:		
				Maintenar	nce:	
				Support:		
				Divorce se	ettlement:	
	ı			Droporty		

	tor 1 tor 2	Jeffrey Kyle Clinksc Jennifer Ann Clinksc		Case number (if known)	
30.	Example No		ility insurance payments, disability benefi al Security benefits; unpaid loans you mad		
31.	Example No Yes	es in insurance policies es: Health, disability, or Name the insurance apany of each policy	ife insurance; health savings account (H	SA); credit, homeowner's, or renter's in	surance
	and	list its value	Company name: Term Life Insurance Policy Insured: Jeffrey Clinkscales Death Benefit: \$54,000.00	Beneficiary:	Surrender or refund value:
			(policy through employer) Term Life Insurance Policy Insured: Jennifer Clinkscales Death Benefit: \$10,000.00 (policy through employer)	Jennifer Clinkscales Jeffrey Clinkscales	\$0.00 \$0.00
32.	If you are entitled No		due you from someone who has died ing trust, expect proceeds from a life insuluse someone has died		
33.	Example No	-	hether or not you have filed a lawsuit of ent disputes, insurance claims, or rights to		
34.	rights to	ontingent and unliquidate o set off claims Describe each claim	ated claims of every nature, including o	counterclaims of the debtor and	
35.	✓ No	ancial assets you did note. Give specific informati			
36.		•	our entries from Part 4, including any e number here		\$1,202.27
Pa	art 5:	Describe Any Busi	ness-Related Property You Own	or Have an Interest In. List a	nny real estate in Part 1.
37.	✓ No.	own or have any legal Go to Part 6. Go to line 38.	or equitable interest in any business-re	elated property?	

	tor 1 tor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales Case number (if known)	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accour	ts receivable or commissions you already earned	
	✓ No ☐ Yes	. Describe]
39.	Exampl	quipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	-
	✓ No ☐ Yes	. Describe]
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of your trade	_
	✓ No ☐ Yes	. Describe]
41.	Invento	ry	_
	✓ No ☐ Yes	. Describe]
42.	Interes	s in partnerships or joint ventures	_
	✓ No	. Describe Name of entity: % of ownership:	
43.	Custon	er lists, mailing lists, or other compilations	
	▼ No □ Yes	. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe]
44.	Any bu	siness-related property you did not already list	-
	✓ No	. Give specific information.	
45.		dollar value of all of your entries from Part 5, including any entries for pages you have d for Part 5. Write that number here	\$0.00
P		Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a f you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	_	Go to Part 7. Go to line 47.	

Debtor 1		Jeffrey Kyle Clinkscales		
Deb	otor 2	Jennifer Ann Clinkscales	Case number (if known)	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm ar	nimals es: Livestock, poultry, farm-raised fish		ordina or over-
	✓ No ☐ Yes			1
	_			
48.	Crops	either growing or harvested		
	_	s. Give specific]
49.	Farm ar	nd fishing equipment, implements, machi	inery, fixtures, and tools of trade	•
	✓ No ☐ Yes	·]
50.	Farm ar	nd fishing supplies, chemicals, and feed		
	✓ No			1
	☐ Yes			
51.	Any far	m- and commercial fishing-related proper	rty you did not already list	
	☑ No	Oire anasitis		1
		s. Give specific]
52.			art 6, including any entries for pages you have→	\$0.00
Pa	art 7:	Describe All Property You Own or	r Have an Interest in That You Did Not List Above	
53.		have other property of any kind you did res: Season tickets, country club membershi		_
	✓ No ☐ Yes	s. Give specific information.		
54.	Add the	e dollar value of all of your entries from Pa	eart 7. Write that number here →	\$0.00

Debtor 1 Jeffrey Kyle Clinkscales Debtor 2 Jennifer Ann Clinkscales Case number (if known) List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2..... \$0.00 56. Part 2: Total vehicles, line 5 \$34,200.00 57. Part 3: Total personal and household items, line 15 \$7,050.00 58. Part 4: Total financial assets, line 36 \$1,202.27 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Copy personal \$42,452.27 62. Total personal property. Add lines 56 through 61..... \$42,452.27 property total 63. Total of all property on Schedule A/B. Add line 55 + line 62..... \$42,452.27

Fill in this inf	ormation to i	dentify your	case.			
Debtor 1	Jeffrey	Kyle	Clinksca	les		
Debtor 2	First Name Jennifer	Middle Nam	e Last Name Clinksca	les		
(Spouse, if filing)		Middle Nam				
United States Ba	nkruptcy Court fo	r the: NORTHE	RN DISTRICT OF 1	ΓEX.	AS	Check if this is an
Case number (if known)						amended filing
Official Form	106C					
Schedule C:	The Prope	erty You Cl	laim as Exemp	ot		04/19
Using the property space is needed, fi write your name an	you listed on <i>Scl</i> ill out and attach ad case number (i	nedule A/B: Prop to this page as m f known).	perty (Official Form 106 many copies of Part 2	6A/B) 2: Ad	as your source, list the ditional Page as nece	esponsible for supplying correct information. e property that you claim as exempt. If more ssary. On the top of any additional pages,
is to state a speci exempted up to the receive certain be exemption of 100°	fic dollar amoun ne amount of any nefits, and tax-e % of fair market	t as exempt. Al applicable star xempt retireme value under a la	Iternatively, you may tutory limit. Some ex nt fundsmay be unl aw that limits the exe	claii emp imite mpti	m the full fair market v tionssuch as those ed in dollar amount. F	you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the le statutory amount.
Part 1: Ide	entify the Prop	perty You Cla	aim as Exempt			
1. Which set of	exemptions are	you claiming?	Check one only,	even	if your spouse is filing	with you.
	•		nkruptcy exemptions.	11 U	S.C. § 522(b)(3)	
You are	claiming federal e	exemptions. 11 t	U.S.C. § 522(b)(2)			
2. For any prop	erty you list on a	Schedule A/B th	nat you claim as exer	npt, 1	ill in the information	below.
Brief description of Schedule A/B that			Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description:			\$0.00	\square	\$0.00	11 U.S.C. § 522(d)(1)
141 Feed Lot Ro	oad				100% of fair market value, up to any	
Line from Schedule	e A/B:1.1				applicable statutory	
Brief description:		00: >	\$30,000.00		\$0.00	11 U.S.C. § 522(d)(2)
2019 Ford Escal		oo miles)			100% of fair market value, up to any applicable statutory limit	
-	-	-	more than \$170,350? years after that for cas		ed on or after the date	of adjustment.)
No Yes. Dic		property covered	d by the exemption wit	hin 1	,215 days before you fi	led this case?

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales		Case number	(if known)
Part 2:	Additional Page			
	ription of the property and line on A/B that lists this property	Current value of the portion you own	ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	ck only one box for h exemption	
miles) (1st exem	ption: ck Enclave (approx. 165,000 cption claimed for this asset) chedule A/B:3.2	\$4,200.00	\$4,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
miles) (2nd exen	ption: ck Enclave (approx. 165,000 apption claimed for this asset) chedule A/B:3.2	\$4,200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Kitchen F Bedroom Bedroom Office Fur Washer/D Lawn Equ Outdoor F	ption: om Furnishings: \$400.00 furnishings: \$200.00 #1 Furnishings: \$300.00 #2 Furnishings: \$200.00 rnishings: \$300.00 furnishings: \$100.00 furniture: \$100.00 furniture: \$100.00	\$1,900.00	\$1,900.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
\$500.00 Mrs. Clink \$600.00 Daughter	ption: scales Clothing & Accessories: scales Clothing & Accessories: Clothing: \$300.00 Schedule A/B:11	\$1,400.00	\$1,400.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Watch: \$2 Earrings: Ring: \$20 Costume (1st exem	Bands: \$3,000.00 200.00 \$100.00	\$3,600.00	\$3,400.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Watch: \$2 Earrings: Ring: \$20 Costume (2nd exen	Bands: \$3,000.00 200.00 \$100.00	\$3,600.00	\$200.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

Debtor 1 Jeffrey Kyle Clinkscales Debtor 2 Jennifer Ann Clinkscales Case number (if known) Part 2: **Additional Page** Brief description of the property and line on Amount of the Current value of Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$150.00 \$150.00 11 U.S.C. § 522(d)(3) $\overline{\mathbf{Q}}$ 3 Cats 100% of fair market value, up to any Line from Schedule A/B: 13 applicable statutory limit Brief description: \$1,202.27 \$1,202.27 11 U.S.C. § 522(d)(5) $\overline{\mathbf{V}}$ **Checking account** 100% of fair market **BBVA Compass** value, up to any Acct No: xxxxxxx628 applicable statutory limit Line from Schedule A/B: 17.1 Brief description: 11 U.S.C. § 522(d)(7) \$0.00 $\overline{\mathbf{A}}$ \$0.00 **Term Life Insurance Policy** 100% of fair market **Insured: Jeffrey Clinkscales** value, up to any Death Benefit: \$54,000.00 applicable statutory limit (policy through employer) Line from Schedule A/B: 31 Brief description: \$0.00 \$0.00 11 U.S.C. § 522(d)(7) abla**Term Life Insurance Policy** 100% of fair market **Insured: Jennifer Clinkscales** value, up to any applicable statutory Death Benefit: \$10,000.00 limit (policy through employer) Line from Schedule A/B: 31

		dentify your case:				
Debtor 1	Jeffrey First Name	Kyle Middle Name	Clinkscales Last Name			
Debtor 2 (Spouse, if filing)	Jennifer First Name	Ann Middle Name	Clinkscales Last Name			
United States Bar	nkruptcy Court fo	r the: NORTHERN D	ISTRICT OF TEXAS	,		
Case number	, ,				- 0	
(if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	Creditors	Who Have Cla	ims Secured b	y Property		12/15
correct information On the top of any 1. Do any credit No. Che Yes. Fill Part 1: Lis 2. List all securical claim, list the creditor has a	on. If more space additional pages tors have claims och this box and so in all of the informat All Secured ed claims. If a correction separate particular claim, iible, list the claim.	e is needed, copy the s, write your name and secured by your propubmit this form to the conation below.	Additional Page, fill in dicase number (if known perty? ourt with your other solution one secured one than one in Part 2. As	cout, number the entri	ly responsible for supies, and attach it to thing else to report on the Column B Value of collateral that supports this	s form. is form. Column C Unsecured portion
2.1	ic.		property that	value of collateral \$84,280.00	\$0.00	\$84,280.00
Chase Mortgage Creditor's name Attn: Bankruptc Number Street PO Box 24696		secures the o	vood Trail			ΨΟΤΙΣΟΙΙΟ
PO Box 24696		As of the dat	•	s: Check all that apply.		
Columbus City	OH 43224 State ZIP Code	Unliquida				
Who owes the del		☐ Disputed	o Observation and the state of the			
Debtor 1 only	or oncorrono.		 Check all that apply ment you made (such a 	/. as mortgage or secured	car loan)	
Debtor 2 only		_	lien (such as tax lien,		our rouny	
Debtor 1 and D		☐ Judgmen	t lien from a lawsuit	,		
At least one of	the debtors and	✓ Onlei (inc	cluding a right to offset			
Check if this of to a communication		Conven	tional Real Estate N	Nortgage		
Date debt was inc	urred <u>05/200</u> 4	Last 4 digits	of account number	6 1 6 7		
Ex-Husband's H	lome					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$84,280.00

Debtor 1 Debtor 2 Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales		Case number (if	known)		
Additional Page Part 1: After listing any entries on sequentially from the previous	. •	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
Don Neel Creditor's name 1001 Willow Way Number Street	Describe the property that secures the claim: 2019 Ford Escape	\$34,031.74	\$30,000.00	\$4,031.74	
Benbrook TX 76126 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Automobile				
2.3 First Bank Creditor's name 520 W. Summit Hill Drive Number Street	Last 4 digits of account number Describe the property that secures the claim: 2018 Energy Saver	\$45,832.83	\$0.00	\$45,832.83	
Knoxville TN 37902 City State ZIP Code Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another ☑ Check if this claim relates to a community debt Date debt was incurred	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med) Judgment lien from a lawsuit Other (including a right to offset) Mobile Home Last 4 digits of account number	mortgage or secured	car loan)		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$79,864.57

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$164,144.57

Fill in this inf	ormation to i	dentify your c	200:	I		
Debtor 1	Jeffrey First Name	Kyle Middle Name	Clinkscales Last Name			
Debtor 2	Jennifer	Ann	Clinkscales			
(Spouse, if filing)		Middle Name	Last Name			
United States Bar	nkruptcy Court fo	or the: NORTHER	RN DISTRICT OF TEXAS			
Case number (if known)					Check if this i	
Official Form	106E/F					
Schedule E/	F: Credito	rs Who Hav	e Unsecured Claims			12/15
Do not include an If more space is n to this page. On t	y creditors with eeded, copy the he top of any ac	partially secured Part you need, fi Iditional pages, w	and on Schedule G: Executory Co claims that are listed in Schedule ill it out, number the entries in the crite your name and case number secured Claims	D: Creditors Who I boxes on the left. A	lold Claims Sec	ured by Property.
1. Do any credit	tors have priorit	y unsecured clair	ns against you?			
claim. For ea	ur priority unsect ch claim listed, ic prity and nonprior	dentify what type o	creditor has more than one priority of claim it is. If a claim has both prior nuch as possible, list the claims in a ms, fill out the Continuation Page of	ity and nonpriority am phabetical order accordance	nounts, list that coording to the crea	laim here and ditor's name. If
claim, list the	other creditors in	Part 3.				
(For an explar	nation of each typ	oe of claim, see the	e instructions for this form in the inst	ruction booklet. Total claim	Priority	Nonpriority
2.1					amount	amount
Priority Creditor's Nam	ιΔ		Last 4 digits of account number			
			When was the debt incurred?			
Number Street			As of the date you file, the claim	is: Check all that ap	 ply.	
			Contingent			
Oit.	04-4-	710.0-4-	Unliquidated Disputed			
City Who incurred the	State Check	ZIP Code	Type of PRIORITY unsecured cla	im·		
Debtor 1 only	dosti onook	0110.	Domestic support obligations			
Debtor 2 only Debtor 1 and D	Oebtor 2 only		Taxes and certain other debts	,	nent	
	the debtors and	another	Claims for death or personal ir intoxicated	njury while you were		
	claim is for a co	mmunity debt	Other. Specify			
Is the claim subje	ct to offset?					
□ No □ Yes						

Debtor 1 Jeffrey Kyle Clinkscales Debtor 2 Jennifer Ann Clinkscales	Case number (if known)	
Part 2: List All of Your NONPRIORIT	Y Unsecured Claims	
3. Do any creditors have nonpriority unsecured	d claims against you?	
No. You have nothing to report in this part✓ Yes	t. Submit this form to the court with your other schedules.	
If a creditor has more than one nonpriority unsetype of claim it is. Do not list claims already inc	in the alphabetical order of the creditor who holds each claim. Ecured claim, list the creditor separately for each claim. For each claim listed, cluded in Part 1. If more than one creditor holds a particular claim, list the other unsecured claims, fill out the Continuation Page of Part 2.	•
		Total claim
4.1		\$20,385.00
American Honda Finance Nonpriority Creditor's Name	Last 4 digits of account number 2 2 5 6	
Attn: Bankruptcy	When was the debt incurred? 10/2014	
Number Street PO Box 168088	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Irving TX 75016	Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Lease	
Is the claim subject to offset? ✓ No ☐ Yes REPO		
4.2		\$16,085.00
American Honda Finance Nonpriority Creditor's Name	Last 4 digits of account number0989	
Attn: Bankruptcy	When was the debt incurred? 12/2014	
Number Street PO Box 168088	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Irving TX 75016	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Other. Specify Automobile	
Is the claim subject to offset? ✓ No ☐ Yes REPO		

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales		
Debioi 2	Jennifer Ann Clinkscales	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecui	red Claims Continuation Page	
After listin	g any entries on this page, number the	m sequentially from the	Total claim
previous p	age.		i Otal Claiili
4.3			\$0.00
Bank of A	America	Last 4 digits of account number 6 5 2 1	
	reditor's Name	When was the debt incurred? 08/2006	
Attn: Ban	kruptcy Street	As of the date you file, the claim is: Check all that apply.	
PO Box 9		_ ☐ Contingent	
		Unliquidated	
El Doce	TV 70009	Disputed	
El Paso City	TX 79998 State ZIP Code	Type of NONDDIODITY unconvend claims	
-	red the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
□ Debtor	1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
☐ Debtor	•	that you did not report as priority claims	
≌	1 and Debtor 2 only	☐ Debts to pension or profit-sharing plans, and other similar debts	
	t one of the debtors and another	Other. Specify	
☑ Check	if this claim is for a community debt	Conventional Real Estate Mortgage	
— NI:	n subject to offset?		
✓ No ☐ Yes			
Yes			
4.4			\$1,448.00
Cavalry P	Portfolio Services	Last 4 digits of account number 2 1 6 4	41,110.00
	reditor's Name	When was the debt incurred? 01/2017	
	Inkruptcy Department	<u> </u>	
Number 500 Sumr	Street nit Lake Ste 400	As of the date you file, the claim is: Check all that apply.	
		_	
		Disputed	
Valhalla City	NY 10595 State ZIP Code		
•	red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor	1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor	2 only	that you did not report as priority claims	
ك	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
ш	t one of the debtors and another	Other. Specify	
	if this claim is for a community debt	Collection Attorney	
	n subject to offset?		
✓ No			
Yes		_	
Original C	Creditor Name: SYNCHRONY BANK		

Debtor 1 Jeffrey Kyle Clinkscales Debtor 2 Jennifer Ann Clinkscales	Case number (if known)	
	· · · /	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
previous page.		
4.5		\$0.00
Chase Card Services	Last 4 digits of account number 4 8 0 2	
Nonpriority Creditor's Name	When was the debt incurred? 04/2014	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 15298	_ Contingent	
	Unliquidated	
Wilmington DE 19850	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☑ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No No		
Yes		
4.6		\$0.00
Compaity Bank/Buokla	Last 4 digits of account number 4 2 9 0	40.00
Comenity Bank/Buckle Nonpriority Creditor's Name	Last 4 digits of account number 4 3 8 9	
Attn: Bankruptcy	When was the debt incurred? 12/31/2011	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 182125	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Columbus OH 43218		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	5.1a. go 7.000unt	
No		
Yes		

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales		
Debtor 2	Jennier Ann Chirkscales	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing	g any entries on this page, number the age.	m sequentially from the	Total claim
4.7			\$2,228.00
	wealth Financial Systems	Last 4 digits of account number01N1_	
Nonpriority C	reditor's Name kruptcv	When was the debt incurred? 04/2019	
Number	Street	As of the date you file, the claim is: Check all that apply.	
245 Main	Street	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	D1 40540	Disputed	
Dickson (City PA 18519 State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
☐ Debtor ☐ Debtor	•	Obligations arising out of a separation agreement or divorce	
	1 and Debtor 2 only	that you did not report as priority claims	
	t one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	if this claim is for a community debt	Collection Attorney	
	n subject to offset?		
☑ No ☐ Yes			
ш	reditor Name: TEXAS HEALTH RE	SOURCES	
4.8			* 4 *** **
	ama Dive	Local Admits of account number 7 0 2 4	\$4,033.00
Conn's Ho	reditor's Name	Last 4 digits of account number7031	
Attn: Ban Number	kruptcy Dept Street	When was the debt incurred? 01/21/2016 As of the date you file, the claim is: Check all that apply.	
PO Box 2		_ ☐ Contingent	
		Unliquidated	
Beaumon	t TX 77704	─	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor	red the debt? Check one. 1 only	Student loans	
☐ Debtor	2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
	t one of the debtors and another	Other. Specify	
<u></u>	if this claim is for a community debt n subject to offset?	Secured	
✓ No	ii dabjeet to ondet:		
Yes			
Charge O	ff		

Debtor 1	
Part 2: Your NONPRIORITY Unsecured Claims Continuation Page	
After listing any entries on this page, number them sequentially from the previous page.	Total claim
4.9	\$581.00
Conn's HomePlus Last 4 digits of account number 7 0 3 2	
Nonpriority Creditor's Name Attn: Bankruptcy Dept When was the debt incurred? 02/09/2016	
Number Street As of the date you file, the claim is: Check all that apply.	
PO Box 2358 Contingent Unliquidated	
□ Disputed	
Beaumont TX 77704	
City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one.	
Debtor 1 only	
Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
✓ Debtor 1 and Debtor 2 only □ Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Other. Specify	
☐ Check if this claim is for a community debt Secured	
Is the claim subject to offset?	
☑ No ☐ Yes	
Charge Off	
4.10	\$0.00
Credit First National Association Last 4 digits of account number 8 7 1 9	
Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? 01/2006	
Number Street As of the date you file, the claim is: Check all that apply.	
PO Box 81315 Contingent	
Unliquidated Disputed	
Cleveland OH 44181	
City State ZIP Code Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce.	
Debtor 2 only	
that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Other. Specify	
☑ Check if this claim is for a community debt Charge Account	
Is the claim subject to offset?	
☑ No	

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
Part 2:	Your NONPRIORITY Unsacu	red Claims Continuation Page	
	g any entries on this page, number the	m sequentially from the	Total claim
previous p	age.		
4.11			\$2,163.00
Credit On		Last 4 digits of account number3531	
' '	reditor's Name Inkruptcy Department	When was the debt incurred? 02/2012	
Number	Street	As of the date you file, the claim is: Check all that apply.	
PO Box 9	8873	_ Contingent	
		Unliquidated	
Las Vega	s NV 89193	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
Debtor Debtor		Obligations arising out of a separation agreement or divorce	
	1 and Debtor 2 only	that you did not report as priority claims	
	t one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check	if this claim is for a community debt	Credit Card	
	n subject to offset?		
☑ No	•		
Yes			
4.12			\$157.00
Credit Sy	stems International, Inc	Last 4 digits of account number 6 8 2 5	
. ' _ '	reditor's Name	When was the debt incurred? 08/2015	
Attn: Ban	Street	As of the date you file, the claim is: Check all that apply.	
PO Box 1	088	_ Contingent	
		Unliquidated	
Arlington	TX 76004	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
☐ Debtor ☐ Debtor	•	Obligations arising out of a separation agreement or divorce	
ш	1 and Debtor 2 only	that you did not report as priority claims	
	t one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check	if this claim is for a community debt	✓ Other. Specify Collection Attorney	
	n subject to offset?		
☑ No			
Yes			
Original C	Creditor Name: RADIOLOGY ASSO	C OF N TEXAS	

\$260.00
\$915.00

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
	ng any entries on this page, number the		Total claim
4.15			\$537.00
	Creditor's Name way 96 East Street	Last 4 digits of account number 7 8 0 3 When was the debt incurred? 04/12/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
St. Paul	MN 55164	Disputed	
City Who incur Debtor Debtor Debtor At leas	State ZIP Code red the debt? Check one. 1 only 2 only 1 and Debtor 2 only st one of the debtors and another x if this claim is for a community debt	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unknown Loan Type	
	m subject to offset?		
✓ No ☐ Yes			
Original (Creditor Name: 05 0749 LIFE STOR	AGE	
4.16			\$1,352.00
	inance Compan	Last 4 digits of account number8019_	
Po Box 3	Creditor's Name 970	When was the debt incurred? 05/2016	
Number	Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Debtor Debtor Debtor Debtor At leas Check		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unsecured	
✓ No Ves	•		

After listing any entries on this page, number them sequentially from the previous page. 4.17 Kohis/Capital One Nonpriority Creditor's Name Kohis Card Support/Bankruptcy Number Street PO Box 3120 Milwaukee WI 53201 City State ZiP Code Who incurred the debt? Conly Debtor 1 only Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? Milwaukee WI 53201 City Check one. Debtor 1 only Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? Milwaukee WI 53201 City Check one. Debtor 1 only Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? Milwaukee WI 53201 City Check one. Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? Milwaukee WI 53201 City Check one. Debtor 1 only Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? Milwaukee WI 53201 City Check one. Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset?	Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
After listing any entries on this page, number them sequentially from the previous page. 4.17 At At At At At At At A	Part 2	Your NONPRIORITY Unsecu		
A.17 Second Policy Creditor's Name Second Policy Size Size Second Policy Size Size Size Size Second Policy Size			<u> </u>	
Contingent Con			•	Total claim
Nonprotrity Creditor's Name Kohls Card Support/Bankruptcy State ZIP Code Check if this claim is for a community debt State ZIP Code Check one. Debtor 1 only Codingent Contingent	4.17			\$2,543.00
Non-big	Kohls/Ca	pital One	Last 4 digits of account number 4 3 4 1	
Number Street PO Box 3120			When was the debt incurred? 03/2012	
Contingent Indiquidated Disputed				
Milwaukee Wi 53201 Disputed Disputed	PO Box 3			
Milwaukee WI 53201 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this Card Support/Bankruptcy Number Street PO Box 3120 Milwaukee WI 53201 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim is before a community debt Is the claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim is for a community debt Is the claim subject to o				
Type of NONPRIORITY unsecured claim: State	Milwauko	w WI 53201	Disputed	
Debtor 1 only			Type of NONPRIORITY unsecured claim:	
□ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 and Debtor 2 only □ Debtor 4 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this Capital One □ Yes □ No □ Yes □ At least One of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ At least One □ Nonpriority Creditor's Name ■ Kohls/Capital One ■ Last 4 digits of account number 8 1 9 8 ■ When was the debt incurred? 09/2008 ■ As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ No □ No □ No □ No □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ No □ No □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ No	Who incur	red the debt? Check one.		
Debtor 2 only	ш	•		
At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Last 4 digits of account number 8 1 9 8 When was the debt incurred? 09/2008 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Milwaukee WI 53201 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	≒ ~	•		
Check if this claim is for a community debt Is the claim subject to offset? No	<u> </u>	· ·		
Is the claim subject to offset? No Yes 4.18 Kohls/Capital One Nonpriority Creditor's Name Kohls Card Support/Bankruptcy Number Street PO Box 3120 Milwaukee Wi 53201 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Who is claim is for a community debt Is the claim subject to offset? No No No Kohls/Capital One Last 4 digits of account number 8 1 9 8 When was the debt incurred? 09/2008 When was the debt incurred? 09/2008 As of the date you file, the claim is: Check all that apply. Chock all that apply. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account				
Section State St	_		Charge Account	
Yes \$2,003.00		n subject to onset?		
Section State ZiP Code Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt State Claim subject to offset? No	Ľ v			
Kohls/Capital One Card Support/Bankruptcy				
Nonpriority Creditor's Name Kohls Card Support/Bankruptcy Number Street PO Box 3120 Milwaukee WI 53201 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Creditor's Name Kohls Card Support/Bankruptcy As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account	4.18			\$2,003.00
When was the debt incurred? O9/2008	Kohls/Ca	pital One	Last 4 digits of account number 8 1 9 8	
Number Street PO Box 3120 Milwaukee WI 53201 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No No No Milwaukee WI 53201 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Charge Account			-	
Milwaukee WI 53201 City State ZIP Code Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account				
Milwaukee				
Milwaukee City State ZIP Code Check one. Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Mo No No State ZIP Code Check one. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account Charge Account				
City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	Milwauko	w WI 53201	Disputed	
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No			Type of NONPRIORITY unsecured claim:	
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	Who incur	red the debt? Check one.	••	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	ш	•		
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	\square	•	that you did not report as priority claims	
Check if this claim is for a community debt Is the claim subject to offset? No	≌	•		
Is the claim subject to offset? ✓ No	_			
☑ No	_		Charge Account	
L Ver		ii Subject to onset?		
	Yes			

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
Dort 2	Vaur NONDDIODITY Unacqui		
Part 2:	Tour NONPRIORITT Unsecu	red Claims Continuation Page	
	ng any entries on this page, number the	m sequentially from the	Total claim
previous p	page.		i otai olaiiii
4.19			\$2,163.00
LVNV Fu	nding/Resurgent Capital	Last 4 digits of account number 3 5 3 1	
Nonpriority C	creditor's Name	When was the debt incurred? 01/2017	
Attn: Ban	Street	As of the date you file, the claim is: Check all that apply.	
PO Box 1		_ ☐ Contingent	
		Unliquidated	
Greenville	e SC 29603	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	☐ Student loans	
\square	1 only	Obligations arising out of a separation agreement or divorce	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		that you did not report as priority claims	
	st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check	if this claim is for a community debt	✓ Other. Specify Factoring Company Account	
_	m subject to offset?	racioning company recount	
√ No	•		
Yes			
Original (Creditor Name: CREDIT ONE BANK	CN.A.	
4.20			\$0.00
Midland F	Funding	Last 4 digits of account number 0 6 8 9	<u> </u>
	creditor's Name	When was the debt incurred?	
Number	hae Young Street	As of the date you file, the claim is: Check all that apply.	
PO Box 4		_ Contingent	
		Unliquidated	
Houston	TX 77056	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
☐ Debtor		Obligations arising out of a separation agreement or divorce	
	1 and Debtor 2 only	that you did not report as priority claims	
<u> </u>	st one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
— Check	if this claim is for a community debt	✓ Other. Specify Credit Card	
	m subject to offset?		
☑ No	-		
☐ Yes			

	ey Kyle Clinkscales ifer Ann Clinkscales	Case number (if known)	
Part 2: You	ır NONPRIORITY Unsecu	red Claims Continuation Page	
	ntries on this page, number the	<u> </u>	Total claim
4.21			\$3,971.00
Midland Funding Nonpriority Creditor's Na		Last 4 digits of account number 9 6 0 5 5 5 6 When was the debt incurred? 02/2017	
2365 Northside D	Or Ste 300	When was the debt incurred? 02/2017 As of the date you file, the claim is: Check all that apply.	
		□ Contingent □ Unliquidated	
San Diego	CA 92108	Disputed	
City Who incurred the d	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor 1 only		Student loans Obligations arising out of a separation agreement or divorce	
☐ Debtor 2 only ☐ Debtor 1 and De	ebtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of t	the debtors and another	✓ Other. Specify	
	laim is for a community debt	Factoring Company Account	
Is the claim subject No	et to offset?		
Yes			
4.22			\$3,455.00
Midland Funding		Last 4 digits of account number 9 0 7 7	
Nonpriority Creditor's Na 2365 Northside D	_	When was the debt incurred? 02/2017	
Number Street		As of the date you file, the claim is: Check all that apply.	
San Diego	CA 92108	Disputed	
City Who incurred the d	State ZIP Code debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	debt? Check one.	Student loans	
Debtor 2 only		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and De	ebtor 2 only the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	laim is for a community debt		
Is the claim subjec	t to offset?	G to page 1	
✓ No ☐ Yes			
Original Creditor	Name: COMENITY CAPITA	AL BANK	

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecure	ed Claims Continuation Page	
After listin	g any entries on this page, number then	•	Total claim
	Street	Last 4 digits of account number 5 8 3 3 When was the debt incurred? 04/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$6,207.00
Debtor Debtor Debtor Debtor At leas Check		Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Collection Attorney	
Original C	Creditor Name: CANYONS APTS		\$3,296.00
Nonpriority C Attn: Ban Number	Recovery reditor's Name kruptcy Street orate Blvd	Last 4 digits of account number 0 9 4 9 When was the debt incurred? 11/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Debtor Debtor Debtor At leas Check Is the claim Yes		Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Factoring Company Account	

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
Don't Or			
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	g any entries on this page, number the page.	m sequentially from the	Total claim
4.25	-		#2.252.00
	Pagavary	Last 4 digits of account number 4 3 8 9	\$2,253.00
	Recovery Creditor's Name		
Attn: Ban			
Number 120 Corp	Street orate Blvd	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	VA 00500	Disputed	
Norfold City	VA 23502 State ZIP Code	Type of NONDRIGHTY uncestured eleim:	
-	red the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
□ Debtor		☐ Obligations arising out of a separation agreement or divorce	
Debtor	•	that you did not report as priority claims	
ــــــــــــــــــــــــــــــــــــــ	1 and Debtor 2 only at the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	if this claim is for a community debt	☑ Other. Specify	
_		Factoring Company Account	
✓ No	n subject to offset?		
Yes			
	Creditor Name: WORLD FINANCIAL	. NETWORK BANK	
4.26			#0.000.00
		Lord A Philips of account wombers 2000 A 4	\$2,000.00
Pro Colle	creditor's Name	Last 4 digits of account number 8 2 1 4	
Attn: Ban	kruptcy	When was the debt incurred? 07/2017	
Number 12170 N A	Street Abrams Road, Ste 100	As of the date you file, the claim is: Check all that apply.	
12170147	Abrains Road, Ste 100	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
		— ☐ Disputed	
Dallas City	TX 75243 State ZIP Code		
	red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor	1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor		that you did not report as priority claims	
≌	1 and Debtor 2 only at the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
_		Other. Specify	
<u> </u>	if this claim is for a community debt	Collection Attorney	
Is the clair No	n subject to offset?		
Yes			
—	Creditor Name: SURE DEPOSIT		

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Coop number (if known)	
		Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	g any entries on this page, number the page.	em sequentially from the	Total claim
4.27			\$2,000.00
Pro Colle	<u> </u>	Last 4 digits of account number8214_	
Nonpriority C Attn: Ban	reditor's Name kruptcv	When was the debt incurred? 07/2017	
Number	Street	As of the date you file, the claim is: Check all that apply.	
12170 N /	Abrams Road, Ste 100	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
		Disputed	
Dallas City	TX 75243 State ZIP Code	Type of NONDDIODITY upgeoured eleims	
-	red the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor		☐ Obligations arising out of a separation agreement or divorce	
☐ Debtor	· 2 only · 1 and Debtor 2 only	that you did not report as priority claims	
ــــــــــــــــــــــــــــــــــــــ	et one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check	if this claim is for a community debt	✓ Other. Specify Collection Attorney	
_	n subject to offset?	•	
☑ No			
Yes	One dit on Name of OUDE DEDOOIT		
Original	Creditor Name: SURE DEPOSIT		
4.28			\$1,820.00
Pro Colle		Last 4 digits of account number 8 2 1 4	
Nonpriority C Attn: Ban	reditor's Name skruptcv	When was the debt incurred? 07/2017	
Number	Street	As of the date you file, the claim is: Check all that apply.	
12170 N /	Abrams Road, Ste 100	□ Contingent □ Unliquidated	
		☐ Unliquidated ☐ Disputed	
Dallas City	TX 75243 State ZIP Code	Time of NONDRIORITY are accounted also institute	
	red the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Debtor	•	☐ Obligations arising out of a separation agreement or divorce	
☐ Debtor	2 only 1 and Debtor 2 only	that you did not report as priority claims	
<u> </u>	it one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
ш	if this claim is for a community debt	✓ Other. Specify Collection Attorney	
	n subject to offset?	225011011	
☑ No			
Yes			
Original (Creditor Name: OXFORD AT LAKE	WORTH / STONE L	

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
r art Z.	Tour North Month Folloccu	rea Glaims Continuation Lage	
	g any entries on this page, number the	m sequentially from the	Total claim
previous p	oage.		
4.29			\$1,820.00
Pro Colle	ct, Inc	Last 4 digits of account number 8 2 1 4	
' '	reditor's Name	When was the debt incurred? 07/2017	
Attn: Ban	Street	As of the date you file, the claim is: Check all that apply.	
	Abrams Road, Ste 100	_ ☐ Contingent	
		Unliquidated	
Dallas	TX 75243	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
-	red the debt? Check one.	Student loans	
☐ Debtor	•	☐ Obligations arising out of a separation agreement or divorce	
Debtor	•	that you did not report as priority claims	
	1 and Debtor 2 only at one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
		Other. Specify	
	if this claim is for a community debt	Collection Attorney	
	n subject to offset?		
✓ No ☐ Yes			
ш.	Creditor Name: OXFORD AT LAKE	WORTH / STONE I	
4.30			\$0.00
	nf Financial S	Last 4 digits of account number 1 0 1 4	
	creditor's Name ant Irvin Rd Ste 411	When was the debt incurred? 05/18/2011	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		Unliquidated	
Fort Wort	th TX 76132	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
☐ Debtor	•	Obligations arising out of a separation agreement or divorce	
브 ~	1 and Debtor 2 only	that you did not report as priority claims	
<u> </u>	at one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
ш	if this claim is for a community debt		
	n subject to offset?	Troubblion Goods and Other Gonatoral Auto	
✓ No			
Yes			

Debtor 1 Jeffrey Kyle Clinkscales Debtor 2 Jennifer Ann Clinkscales	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.31		\$3,182.00
Syncb/hhgreg	Last 4 digits of account number 6 8 9 3	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 09/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 965060	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Orlando FL 32896		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations griging out of a congretion agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset? ✓ No		
Yes		
4.32		\$1,448.00
Syncb/NewEgg	Last 4 digits of account number2045	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 10/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 965060	_ ☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
Orlando FL 32896 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Charge Account	
✓ No		
Yes		
4.33		\$3,295.00
Syncb/Rooms To Go	Last 4 digits of account number 0 9 4 9	ψ3,293.00
Nonpriority Creditor's Name	Last 4 digits of account number 0 9 4 9 When was the debt incurred? 07/2014	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 965060	_ Contingent	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Charge Account	
Is the claim subject to offset?	-	
☑ No		
☐ Yes		

Debtor 1 Jeffrey Kyle Clinkscales Debtor 2 Jennifer Ann Clinkscales	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.34		\$0.00
Synchrony Bank	Last 4 digits of account number 8 3 8 0	
Nonpriority Creditor's Name	When was the debt incurred? 07/01/2011	
Attn: Bankruptcy Dept Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 965060	_ ☐ Contingent	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Charge Account	
Is the claim subject to offset?	3	
☑ No		
Yes		
4.35		* 4.005.00
	Last 4 digits of account number 2 2 2 0	\$4,005.00
Synchrony Bank/Amazon Nonpriority Creditor's Name	Last 4 digits of account number 3 2 3 0	
Attn: Bankruptcy	When was the debt incurred? 12/2014	
Number Street PO Box 965060	As of the date you file, the claim is: Check all that apply.	
1 0 Box 300000	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
	— ☐ Disputed	
Orlando FL 32896 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset? ✓ No		
Yes		
4.36		\$65.00
Synerprise Consulting Services, Inc	Last 4 digits of account number 6 7 1 5	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 03/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
5651 Broadmoor	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Mission KS 66202		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset?	-	
☑ No		
Yes		

Debtor 1 Debtor 2	Jeffrey Kyle Jennifer Ann			Case number (if known)	
Port 2	Vour NON	DDIO	DITY Uncon		
Part 2:				red Claims Continuation Page	
After listing		this p	age, number the	em sequentially from the	Total claim
	age.				
4.37					\$881.00
	ountys Cu			Last 4 digits of account number 8 9 0 1	
, ,	reditor's Name or St Ste 215			When was the debt incurred? 08/13/2013	
	Street			As of the date you file, the claim is: Check all that apply.	
				Contingent	
				☐ Unliquidated ☐ Disputed	
Fort Wort		TX	76196		
City		State	ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor		Check	one.	Student loans	
Debtor	•			Obligations arising out of a separation agreement or divorce	
	1 and Debtor 2 o	nly		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
ш	t one of the debto			☐ Other. Specify	
	if this claim is fo	or a co	mmunity debt	Unsecured	
	n subject to offs	et?			
☑ No					
Yes					
4.38					\$365.00
TXU/Texa	s Fneray			Last 4 digits of account number 8 2 4 8	Ψοσο.σο
	reditor's Name			When was the debt incurred? 09/2016	
Attn: Ban	kruptcy Street			As of the date you file, the claim is: Check all that apply.	
PO Box 6				Contingent Contingent	
				Unliquidated	
Dallas		TX	75265	Disputed	
City		State	ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurr	red the debt?	Check	one.	Student loans	
Debtor	•			Obligations arising out of a separation agreement or divorce	
Debtor	•	nlv		that you did not report as priority claims	
<u>-</u>	1 and Debtor 2 o t one of the debto	•	l another	Debts to pension or profit-sharing plans, and other similar debts	
—	if this claim is fo			Other. Specify	
_	n subject to offs		ainty dobt	Agriculture	
No No	ii subject to ons	G. :			
Yes					

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
David On			
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing previous p	g any entries on this page, number the age.	em sequentially from the	Total claim
4.39			\$947.00
United Re	evenue Corp.	Last 4 digits of account number 9 9 4 8	Ψ3+1.00
Nonpriority C	reditor's Name	When was the debt incurred? 03/2013	
204 Billing	gs Street Street	As of the date you file, the claim is: Check all that apply.	
Suite 120		_ ☐ Contingent	
		Unliquidated	
Arlington	TX 76010	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
☐ Debtor ☐ Debtor	•	Obligations arising out of a separation agreement or divorce	
	1 and Debtor 2 only	that you did not report as priority claims	
	t one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	if this claim is for a community debt	Collection Attorney	
	n subject to offset?		
☑ No			
Yes	Dura dita u Nama a TEVA O MEDIOINE E	DECOURAGE.	
Original C	Creditor Name: TEXAS MEDICINE F	KESOURCES	
4.40			\$640.00
United Re	evenue Corp.	Last 4 digits of account number 3 5 7 5	
Nonpriority C 204 Billing	reditor's Name	When was the debt incurred? 03/2015	
Number	Street	As of the date you file, the claim is: Check all that apply.	
Suite 120		_ Contingent	
		☐ Unliquidated ☐ Disputed	
Arlington		Disputed	
City	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
□ Debtor		Student loans	
Debtor		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
<u> </u>	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
ш	t one of the debtors and another	☑ Other. Specify	
<u></u>	if this claim is for a community debt	Collection Attorney	
	n subject to offset?		
✓ No ☐ Yes			
ш.	Creditor Name: TEXAS MEDICINE F	RESOURCES	

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	g any entries on this page, number the page.	em sequentially from the	Total claim
4.41			\$482.00
United Re	evenue Corp.	Last 4 digits of account number 0 7 1 5	
	reditor's Name	When was the debt incurred? 10/2016	
Number	gs Street Street	As of the date you file, the claim is: Check all that apply.	
Suite 120		_ Contingent	
		Unliquidated	
Arlington	TX 76010	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incur	red the debt? Check one.	Student loans	
Debtor	•	Obligations arising out of a separation agreement or divorce	
Debtor	•	that you did not report as priority claims	
딸	1 and Debtor 2 only tone of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
<u> </u>		Other. Specify	
	if this claim is for a community debt	Collection Attorney	
	n subject to offset?		
✓ No ☐ Yes			
ш.	Creditor Name: TEXAS MEDICINE F	RESOURCES	
Original	Steuttor Name. TEXAS MEDICINE P	RESOURCES	
4.42			\$0.00
Wells Far	go Bank	Last 4 digits of account number 0 0 0 2	
Nonpriority C	reditor's Name	When was the debt incurred? 04/03/1998	
MAC F82:	Street	As of the date you file, the claim is: Check all that apply.	
PO Box 1		_ ☐ Contingent	
		Unliquidated	
Dec Mein	. IA F0206	Disputed	
Des Moin City	IA 50306 State ZIP Code	Type of NONPRIORITY unsecured claim:	
-	red the debt? Check one.		
☐ Debtor	1 only		
Debtor	•	that you did not report as priority claims	
<u>.</u>	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
ш	t one of the debtors and another	Other. Specify	
☑ Check	if this claim is for a community debt		
	n subject to offset?		
☑ No			
☐ Yes			

Debtor 1 Jeffrey Kyle Clinkscales Debtor 2 Jennifer Ann Clinkscales	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.43		\$0.00
Wells Fargo Bank	Last 4 digits of account number 0 0 0 4	
Nonpriority Creditor's Name MAC F823F-02F	When was the debt incurred? 08/24/1998	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 10438	Contingent	
	Unliquidated Disputed	
Des Moines IA 50306		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only		
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset? ✓ No		
Yes		
4.44		\$0.00
Wells Fargo Bank Nonpriority Creditor's Name	Last 4 digits of account number0003_	
MAC F823F-02F	When was the debt incurred? 08/1998	
Number Street PO Box 10438	As of the date you file, the claim is: Check all that apply.	
10 Box 10430	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
	Disputed	
Des Moines IA 50306 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only		
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
4.45		£0.00
	Last 4 digits of account number 0 0 1	\$0.00
Wells Fargo Bank NA Nonpriority Creditor's Name	Last 4 digits of account number 0 0 0 1 When was the debt incurred? 02/2007	
Attn: Bankruptcy	As of the date you file, the claim is: Check all that apply.	
Number Street 1 Home Campus MAC X2303-01A	_ Contingent	
-	Unliquidated	
Des Moines IA 50328	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Lease	
Is the claim subject to offset?		
No Yes		
☐ Yes		

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing previous pa	any entries on this page, number the ge.	m sequentially from the	Total claim
Nonpriority Cre Attn: Bank	cruptcy Street	Last 4 digits of account number 9 0 0 1 When was the debt incurred? 03/2011 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated	
Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least Check i	•	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Automobile	

Debtor 1	Jeffrey Kyle Clinkscales	
Debtor 2	Jennifer Ann Clinkscales	Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

^{6.} Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. \$0.00
	6b.	Taxes and certain other debts you owe the government	6b. \$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c. \$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} +\$0.00
	6e.	Total. Add lines 6a through 6d.	6d. \$0.00
			Total claim
Total claims from Part 2	6f.	Student loans	6f. \$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. \$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$98,985.00
	6j.	Total. Add lines 6f through 6i.	6j. \$98,985.00

	tormation to i	dentify your case):		
Debtor 1	Jeffrey First Name	Kyle Middle Name	Clinkscales Last Name		
Dobtor 2	Jennifer	Ann	Clinkoooloo		
Debtor 2 (Spouse, if filing		Ann Middle Name	Clinkscales Last Name		
	ankruptcy Court fo	or the: NORTHERN D	DISTRICT OF TEXAS	<u>s</u>	
Case number (if known)					Check if this is an amended filing
Schedule G	: Executors	y Contracts an	d Unavaired L		
se as complete a	and accurate as pon. If more space	possible. If two marries is needed, copy the	ed people are filing to	gether, both are equally response out, number the entries, and a	
te as complete a correct information the top of any . Do you have	and accurate as pon. If more space additional page	possible. If two marrice is needed, copy the s, write your name and contracts or unexpired	ed people are filing to additional page, fill indicase number (if known the control of the contr	gether, both are equally respo out, number the entries, and a own).	attach it to this page.
Be as complete a correct information the top of any Do you have No. Ch	and accurate as pon. If more space additional page any executory couch this box and f	possible. If two marri- e is needed, copy the s, write your name an contracts or unexpired ile this form with the co	ed people are filing to additional page, fill in ad case number (if known d leases?	gether, both are equally response out, number the entries, and a	o report on this form.
Be as complete a correct information the top of any Do you have No. Cho Yes. Fi List separate is for (for ex	and accurate as pon. If more space additional page any executory ceck this box and fill in all of the inforely each person ely each person	cossible. If two marri- e is needed, copy the s, write your name an contracts or unexpired ile this form with the co- mation below even if the or company with who cle lease, cell phone)	ed people are filing to e additional page, fill in ad case number (if known d leases? Ourt with your other school are contracts or leases are nown you have the contr	gether, both are equally respondent out, number the entries, and a own).	o report on this form. erty (Official Form 106A/B) each contract or lease
Be as complete a correct information the top of any Do you have No. Cho Yes. Fi List separate is for (for executory co	and accurate as pon. If more space additional page any executory ceck this box and fill in all of the inforely each person ample, rent, vehintracts and unexp	cossible. If two marri- e is needed, copy the s, write your name an contracts or unexpired ile this form with the co- mation below even if the or company with who cle lease, cell phone)	ed people are filing to a additional page, fill in ad case number (if known d leases? Ourt with your other sch are contracts or leases are or you have the contract.	gether, both are equally respondent, number the entries, and a pwn). edules. You have nothing else to are listed on Schedule A/B: Properact or lease. Then state what experiences are lease.	o report on this form. erty (Official Form 106A/B) each contract or lease oklet for more examples of
Be as complete a correct information the top of any Do you have No. Che Yes. Fi List separate is for (for executory co	and accurate as pon. If more space additional page any executory ceck this box and fill in all of the inforely each person ample, rent, vehintracts and unexp	cossible. If two marri- tie is needed, copy the s, write your name an contracts or unexpired tile this form with the co- mation below even if the or company with who cole lease, cell phone) tired leases. whom you have the co-	ed people are filing to a additional page, fill in ad case number (if known d leases? Ourt with your other sch are contracts or leases are or you have the contract.	gether, both are equally respondence, out, number the entries, and a pwn). The equality respondence is a second of the entries of the entrie	o report on this form. erty (Official Form 106A/B) each contract or lease oklet for more examples of

tion to identify yo ey Kyle lame Middle N ifer Ann	Clinksc lame Last Name	_	
ame Middle N	lame Last Name	_	
nifer Ann			
	Climbras		
	Clinksc	ales	
ame Middle N	lame Last Name		
cy Court for the: NORT	HERN DISTRICT OF	TEXAS	
			Check if this is amended filing
<u></u>	y Court for the: NORT	y Court for the: NORTHERN DISTRICT OF	y Court for the: NORTHERN DISTRICT OF TEXAS

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do y ☑ □	r ou h No Yes	ave any codebtors?	(If you are filing a	joint case, de	o not list either	spouse	as a codebtor.)
2.		de A No.	• •	o, Louisiana, Neva	da, New Mex	ico, Puerto Ric	o, Texas	(Community property states and territories s, Washington, and Wisconsin.)
		$ \overline{\mathbf{A}} $	Yes In which community sta	ate or territory did v	ou live?	Texas	Fill	in the name and current address of that person.
			Jennifer Ann Clinks Name of your spouse, form 141 Feedlot Road Number Street Aledo City	scales	_	76008 ZIP Code		- -

In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Fill in this inforr	nation to identify	y your case:			
Debtor 1	Jeffrey First Name	Kyle Middle Name	Clinkscales Last Name	Che	eck if this is:
Debtor 2 (Spouse, if filing)	Jennifer First Name	Ann Middle Name	Clinkscales Last Name	_	An amended filing
United States Bank	cruptcy Court for the:	NORTHERN DI	STRICT OF TEXAS	🗆	A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)					MM / DD / YYYY
Official Form 1	വല				

Official Form 1061

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Describe Employment**

۱.	Fill in your employment information.		Debtor 1		Debtor 2 or non-fili	ng spouse
	If you have more than one job, attach a separate page with information about	Employment status	✓ Employed✓ Not employed		☐ Employed✓ Not employed	
	additional employers.	Occupation	IT Support Spec	ialist	Homemaker	
	Include part-time, seasonal, or self-employed work.	Employer's name	DynCorp		_	
	Occupation may include student or homemaker, if it applies.	Employer's address	Number Street	nal Parkway	Number Street	
			Fort Worth	TX 76177 State Zip Code	City	State Zip Code
		How long employed the		· 		·

Part 2: **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse \$4,385.98 \$0.00 List monthly gross wages, salary, and commissions (before all 2. payroll deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. \$0.00 \$0.00 \$4,385.98 \$0.00 Calculate gross income. Add line 2 + line 3.

Official Form 106I Schedule I: Your Income page 1

Debto Debto	· · · · · · · · · · · · · · · · · · ·		Case nun	nber (if known)	
			For Debtor 1	For Debtor 2 or non-filing spouse	
(Copy line 4 here	4.	\$4,385.98	\$0.00	•
5.	List all payroll deductions:				
;	5a. Tax, Medicare, and Social Security deductions	5a.	<u>\$514.86</u>	\$0.00	
;	5b. Mandatory contributions for retirement plans	5b.	\$0.00	<u>\$0.00</u>	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	<u>\$0.00</u>	
;	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
;	5e. Insurance	5e.	\$99.46	\$0.00	
;	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
,	5h. Other deductions. Specify: Dependent Life lanurance	5h. 4	\$3.12	\$0.00	
	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$617.44	<u>\$0.00</u>	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,768.54	\$0.00	
8.	List all other income regularly received:				
;	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00	\$0.00	
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.				
;	8b. Interest and dividends	8b.	\$0.00	\$0.00	
;	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	\$0.00	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
;	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	<u>\$0.00</u>	<u>\$0.00</u>	
	8g. Pension or retirement income	8g.	<u>\$0.00</u>	\$0.00	
	8h. Other monthly income. Specify:	8h. .	- \$0.00	\$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	- • 9.	\$0.00	\$0.00	
	Calculate monthly income. Add line 7 + line 9.	10.	\$3,768.54	+ \$0.00 =	\$3,768.54
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				
	State all other regular contributions to the expenses that you list in S Include contributions from an unmarried partner, members of your housel friends or relatives.			ir roommates, and othe	er
	Do not include any amounts already included in lines 2-10 or amounts that	it are r	not available to pay e	expenses listed in Sche	edule J.
;	Specify:			11. -	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11.	The r	esult is the combine	ed monthly 12.	\$3,768.54
	income. Write that amount on the Summary of Your Assets and Liabilities if it applies.	and (Certain Statistical Inf	formation,	Combined monthly income
13.	Do you expect an increase or decrease within the year after you file t	his fo	rm?		, , ,
	✓ No. None.				
	Yes. Explain:				

	::II in this inform	ation to iden	4:6						
	ill in this inform		tiry your case:			Che	ck if this	is:	
	Debtor 1	Jeffrey First Name	Kyle Middle Name	Clink Last Na	scales ame	-	A suppl	ended filing ement showing	
	Debtor 2 (Spouse, if filing)	Jennifer First Name	Ann Middle Name	Clink Last Na	scales ame	-	chapter followin	13 expenses as g date:	s of the
	United States Bankru	uptcy Court for th	ne: NORTHERN D	STRICT O	F TEXAS	-	MM / DI	D / YYYY	<u> </u>
	Case number (if known)								
O	fficial Form 10	6J				_			
So	chedule J: Yo	ur Expens	es						12/15
naı	rrect information. If me and case numbe	more space is	ible. If two married p needed, attach anoth nswer every question	er sheet to					
1.	Is this a joint case		Scrioia						
2.	No. Go to line ✓ Yes. Does D	e 2. ebtor 2 live in a . Debtor 2 must	separate household' file Official Form 106J		s for Separate House	ehold of	Debtor 2	2.	
	Do not list Debtor 1 Debtor 2.		- 		Dependent's related Debtor 1 or Debtor		to to	Dependent's age	Does dependent live with you?
					Step-Daughter			14	□ No · ☑ Yes
	Do not state the de names.	pendents'							□ No
									Yes No
									Yes
									□ No · □ Yes
									☐ No
									Yes
3.	Do your expenses expenses of peop yourself and your	le other than	☑ No ☐ Yes						
Ŀ	Part 2: Estima	te Your Ong	oing Monthly Exp	enses					
to		of a date after t	nkruptcy filing date ι he bankruptcy is filed	-	•		•	•	
			ish government assis on Schedule I: Your I	•				Your expens	es
4.		-	penses for your residual of the ground the g				4	l	\$1,215.12
	If not included in I	•							
	4a. Real estate ta	xes					4	ła	
	4b. Property, hom	eowner's, or ren	ter's insurance				4	lb	
	4c. Home mainter	nance, repair, an	d upkeep expenses				4	łc	\$135.00
	4d. Homeowner's	association or c	ondominium dues				4	ŀd.	

Debtor 1 Jeffrey Kyle Clinkscales Debtor 2 Jennifer Ann Clinkscales Case number (if known) Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$150.00 6b. Water, sewer, garbage collection 6b. \$50.00 6c. Telephone, cell phone, Internet, satellite, and 6c. \$85.00 cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$800.00 Childcare and children's education costs 8. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$150.00 11. Medical and dental expenses 11. 12. Transportation. Include gas, maintenance, bus or train 12. \$175.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13 \$100.00 magazines, and books 14. Charitable contributions and religious donations 14. \$50.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance \$148.00 15c. 15d. Other insurance. Specify: 15d. **16.** Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 2019 Ford Escape 17a. \$568.02 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: ___ 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19.

	tor 1 tor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if know	n)
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Othe	. Specify: Pet Care	21.	+\$65.00
22.	Calcu	late your monthly expenses.		
	22a.	Add lines 4 through 21.	22a.	\$3,766.14
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$3,766.14
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,768.54
	23b.	Copy your monthly expenses from line 22c above.	23b	\$3,766.14
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$2.40
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	ı file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you eent to increase or decrease because of a modification to the terms of your mortga		
	7 1	No.		
		Yes. Explain here: None.		

Debtor 1	loffroy	Kulo	Clinkoooloo		
Jebior i	Jeffrey First Name	Kyle Middle Name	Clinkscales Last Name		
Debtor 2	Jennifer	Ann	Clinkscales		
Spouse, if filin		Middle Name	Last Name		
Jnited States E	Bankruptcy Court fo	or the: NORTHERN	DISTRICT OF TEXAS		
Case number if known)				Check if this is amended filing	
official For	m 106Sum				
ummary	of Your Ass	ets and Liabili	ties and Certain Statis	stical Information	12/1
hedules after		inal forms, you must			assets
Schedule A	/B: Property (Offici	al Form 106A/B)		Value	of what you own
1a. Copy li	ine 55, Total real e	state, from Schedule	4/B		\$0.00
1b. Copy li	ine 62, Total perso	nal property, from Sch	edule A/B		\$42,452.27
4 0 11	ine 63, Total of all p	property on Schedule	A/B		\$42,452.27
1c. Copy II					
	ummarize You	ır Liabilities			
	ummarize You	ır Liabilities			ı r liabilities bunt you owe
Part 2: S	: Creditors Who Ha	ave Claims Secured b	y <i>Property</i> (Official Form 106D) of claim, at the bottom of the last pa	Amo	ount you owe
Schedule D 2a. Copy the	: Creditors Who Ha he total you listed i //F: Creditors Who i	ave Claims Secured b n Column A, Amount Have Unsecured Clair	of claim, at the bottom of the last parts (Official Form 106E/F)	Amo	\$164,144.57
Schedule D 2a. Copy th Schedule E 3a. Copy th	o: Creditors Who Ha he total you listed i I/F: Creditors Who I he total claims fron	ave Claims Secured b n Column A, Amount Have Unsecured Clain n Part 1 (priority unsec	of claim, at the bottom of the last parts (Official Form 106E/F)	Amo	\$164,144.57
Schedule D 2a. Copy th Schedule E 3a. Copy th	o: Creditors Who Ha he total you listed i I/F: Creditors Who I he total claims fron	ave Claims Secured b n Column A, Amount Have Unsecured Clain n Part 1 (priority unsec	of claim, at the bottom of the last parts of claim, at the bottom of the last parts (Official Form 106E/F) cured claims) from line 6e of Sched	Amo	\$164,144.57 \$0.00
Schedule D 2a. Copy th Schedule E 3a. Copy th	c: Creditors Who Ha he total you listed i VF: Creditors Who i he total claims fron he total claims fron	ave Claims Secured b n Column A, Amount Have Unsecured Clain n Part 1 (priority unsec	of claim, at the bottom of the last parts (Official Form 106E/F) cured claims) from line 6e of Schedusecured claims) from line 6j of Schedusecured claims) from line 6j of Sch	Amo age of Part 1 of Schedule D	\$164,144.5 \$0.0 \$98,985.0

Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$3,766.14

	otor 1 otor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case number (if known)	
P	art 4	Answer These Questions for Administrative and Statist	ical Records	
6.	Are	you filing for bankruptcy under Chapters 7, 11, or 13?		
		No. You have nothing to report on this part of the form. Check this box and s Yes	submit this form to the court with your other schedules	i.
7.	Wha	t kind of debt do you have?		
	$\overline{\mathbf{V}}$	Your debts are primarily consumer debts. Consumer debts are those "incufamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for stati		
		Your debts are not primarily consumer debts. You have nothing to report this form to the court with your other schedules.	on this part of the form. Check this box and submit	
8.		in the Statement of Your Current Monthly Income: Copy your total current mial Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	Ý (1 20	5.98
9.	Сор	y the following special categories of claims from Part 4, line 6 of Schedul	le E/F:	
			Total claim	
	Fror	n Part 4 on Schedule E/F, copy the following:		
	9a.	Domestic support obligations. (Copy line 6a.)	\$0.00	

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

Fill in this info	ormation to i	dentify your case	:
Debtor 1	Jeffrey First Name	Kyle Middle Name	Clinkscales Last Name
Debtor 2	Jennifer	Ann	Clinkscales
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEXAS
Case number			
(if known)			
Official Form	106Dec		

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have true and correct.	read the summary and schedules filed with this declaration and that they are
X /s/ Jeffrey Kyle Clinkscales Jeffrey Kyle Clinkscales, Debtor 1	X /s/ Jennifer Ann Clinkscales Jennifer Ann Clinkscales, Debtor 2
Date 08/21/2019	Date 08/21/2019
MM / DD / YYYY	MM / DD / YYYY

Debtor 1	Jeffrey	Kyle		Clinkscale	S			
	First Name	Middle Nam	ie	Last Name				
ebtor 2	Jennifer	Ann		Clinkscale	s			
Spouse, if filing)	First Name	Middle Nam	ie	Last Name				
Inited States Ba	nkruptcy Court fo	r the: NORTHE	RN DIS	TRICT OF TE	XAS			
Case number						П	baal Williams	
f known)					_	_	heck if this is an mended filing	
fficial Form	107							
		Affaire for	. l.a ali.	dala e e e e e e e e e e e e e e e e e e	ing for Doube			04/40
tatement c	of Financial	Attairs to	r inaiv	iduais Fii	ing for Bankr	uptcy		04/19
ur name and ca	ase number (if kr	e is needed, att nown). Answer	ach a se _l every qu	uestion.	ere You Lived B		nal pages, write	
ur name and ca Part 1: Giv What is your ☑ Married ☐ Not marri	ve Details Abo	e is needed, att nown). Answer out Your Mai status?	ach a se every qu rital Sta	parate sheet to lestion. Itus and Wh	ere You Lived B		nal pages, write	
what is your Married Not marri During the la	ve Details About the current marital sed set 3 years, have	e is needed, att nown). Answer out Your Mai status? you lived anyw	ach a se every qu rital Sta	parate sheet to lestion. Itus and Wh	ere You Lived B	efore	nal pages, write	
what is your Married Not marri During the la	ve Details About the current marital sed set 3 years, have	e is needed, att nown). Answer out Your Mai status? you lived anyw	every querital Sta	parate sheet to testion. Attus and Where than where rs. Do not include the period of	ere You Lived B	efore	Dates Debilived there	
What is your Married Not marri During the la No Yes. List	ve Details About the current marital sed set 3 years, have	e is needed, att nown). Answer out Your Mai status? you lived anyw	rital Sta There others ast 3 year	parate sheet to testion. Attus and Where than where rs. Do not include the period of	you live now?	efore	Dates Deb	
What is your Married Not marri During the la No Yes. List	ve Details About the Current marital sed ast 3 years, have all of the places	e is needed, att nown). Answer out Your Mai status? you lived anyw	rital Sta There others ast 3 year	parate sheet to testion. Attus and Where than where rs. Do not include the period of	you live now? ude where you live not Debtor 2:	efore	Dates Deb lived there	
What is your Married Not marri During the la No Yes. List Debtor 1:	ve Details About the Current marital sed ast 3 years, have all of the places	e is needed, att nown). Answer out Your Mai status? you lived anyw	rital Sta where other ast 3 yea Dates lived	parate sheet to testion. atus and Where than where rs. Do not include there 06/2017	you live now? ude where you live not Debtor 2:	efore	Dates Deb lived there ☑ Same a	
What is your Married Not marri During the la No Yes. List Debtor 1:	ve Details About the Current marital seed ast 3 years, have all of the places	e is needed, att nown). Answer out Your Mai status? you lived anyw	rital Sta There other ast 3 yea Dates lived	parate sheet to lestion. It us and Where than where rs. Do not include there	you live now? ude where you live not Debtor 2: Same as Debt	efore	Dates Deb lived there Same a	
What is your Married Not marri During the la No Yes. List Debtor 1:	ve Details About current marital and set 3 years, have all of the places	e is needed, att nown). Answer out Your Mai status? you lived anyw you lived in the l	rital Sta There other ast 3 yea Dates lived	parate sheet to testion. atus and Where than where rs. Do not include there 06/2017	you live now? ude where you live not Debtor 2: Same as Debt	efore	Dates Deb lived there Same a	

		Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales		Case nur	Case number (if known)				
P	art 2:	Explain the Sources of Y	our Income						
4.	Fill in th	I have any income from employr e total amount of income you rece re filing a joint case and you have	ived from all jobs and all bu	isinesses, including part	t-time activities.	lendar years?			
	□ No ✓ Yes	s. Fill in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions			
From January 1 of the current year until the date you filed for bankruptcy:			✓ Wages, commissions, bonuses, tips	\$36,997.81	Wages, commissions, bonuses, tips				
			Operating a business		Operating a business				
For the last calendar year:		·	✓ Wages, commissions, bonuses, tips	\$52,650.00	☐ Wages, commissions, bonuses, tips				
(Jar	nuary 1 to	December 31, 2018)	Operating a business		Operating a business				
		ndar year before that:	✓ Wages, commissions, bonuses, tips	\$23,318.00	Wages, commissions, bonuses, tips				
(Jar	nuary 1 to	December 31, <u>2017</u>)	Operating a business		Operating a business				
5.	Include unemple and gar Debtor	receive any other income durin income regardless of whether that byment; and other public benefit penbling and lottery winnings. If you 1. th source and the gross income from	income is taxable. Examp ayments; pensions; rental ir are in a joint case and you	les of other income are necome; interest; dividend have income that you re	ds; money collected from la eceived together, list it only	wsuits; royalties;			
	_								

Debtor 1 Debtor 2		Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales Case number (if known)								
Part 3:	Li	st Certain F	aym	ents You M	ade Before \	You Filed for Ba	inkruptcy			
6. Are e	ither D	ebtor 1's or D	ebtor	2's debts prim	arily consume	r debts?				
□и					-	i mer debts. Consul nily, or household pu		d in 11 U.S.C. § 101(8) as		
	D	uring the 90 da	ys be	fore you filed fo	r bankruptcy, di	d you pay any credit	or a total of \$6,825*	or more?		
	г	No. Go to lin	e 7.							
		total an	nount	you paid that c	reditor. Do not i	nclude payments for	nore in one or more produced to domestic support of attorney for this bank	oligations, such as		
	*	Subject to adju	stmer	nt on 4/01/22 ar	nd every 3 years	after that for cases	filed on or after the o	late of adjustment.		
N Y	es. D	ebtor 1 or Deb	otor 2	or both have p	rimarily consu	mer debts.				
_	D	uring the 90 da	ys be	fore you filed fo	r bankruptcy, di	d you pay any credit	or a total of \$600 or	more?		
	г	No. Go to lin	e 7.							
	✓	creditor	r. Do	not include pay	ments for dome		re and the total amou ons, such as child su case.			
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
First Ban Creditor's na					_	\$688.04	\$45,832.83	_ Mortgage		
		Hill Drive			Monthly			☐ Car ☐ Credit card		
	Street				_			Loan repayment		
Suite 801					_			Suppliers or vendors		
Knoxville City)		TN State	37902 ZIP Code	_			Other		
·					Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
		s EXP2 Key I	LLC		_	\$522.00	_	_ Mortgage		
Creditor's na 1900 16th		ot 950			Monthly			Car		
	Street	<u> </u>			_			Credit card		
								☐ Loan repayment☐ Suppliers or vendors		
Denver		(СО	80202				Other		
City			State	ZIP Code	<u>—</u>					
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
Don Neel					<u></u>	\$568.02	\$34,031.74	_ Mortgage		
Creditor's na		av			Monthly			☑ Car		
Number S	Street	ay			_			Credit card		
								☐ Loan repayment☐ Suppliers or vendors		
Benbrool	k		ΤX	76126				Other		
City	-		State	ZIP Code	_					

	tor 1 tor 2	Jeffrey Kyle Clinksca Jennifer Ann Clinksca		Case number (if k	nown)	
7.	Insiders corpora agent, i	s include your relatives; an tions of which you are an o	y general partners; relatives of a officer, director, person in control s you operate as a sole proprieto	payment on a debt you owed anyony general partners; partnerships of , or owner of 20% or more of their vor. 11 U.S.C. § 101. Include payments	one who was an insider? f which you are a general proting securities; and any n	oartner; nanaging
	✓ No ☐ Yes	s. List all payments to an i	nsider.			
8.		1 year before you filed fo ed an insider?	r bankruptcy, did you make an	y payments or transfer any prope	erty on account of a debt	that
	Include	payments on debts guarar	nteed or cosigned by an insider.			
	✓ No	s. List all payments that be	enefited an insider.			
Р	art 4:	Identify Legal Acti	ons, Repossessions, and	l Foreclosures		
9.						
	□ No ☑ Yes	s. Fill in the details.				
Mic	Case title Midland Funding LLC v. Jeff Clinkscales		Nature of the case Debt Collection	Court or agency Justice Court, Prec Court Name Parker County, Tex	inct 4	atus of the case — ☑ Pending — □ On appeal
Cas	e numbe	DC4-19-00689		Number Street		Concluded
				City	State ZIP Code	
10.	seized,	1 year before you filed fo or levied? all that apply and fill in the		property repossessed, foreclosed	d, garnished, attached,	
	✓ No. Go to line 11.✓ Yes. Fill in the information below.					
11.		•	or bankruptcy, did any credito refuse to make a payment bec	r, including a bank or financial in ause you owed a debt?	stitution, set off any	
	✓ No ☐ Yes	s. Fill in the details.				
12.			r bankruptcy, was any of your eiver, a custodian, or another o	property in the possession of an official?	assignee for the benefit	of
	✓ No	3				

Debtor 1 Debtor 2	Jeffrey Kyle C Jennifer Ann C		Case numbe	r (if known)	
Part 5:	List Certain	Gifts and Co	ntributions		
13. Within	2 years before yo	ou filed for bank	ruptcy, did you give any gifts with a total value of m	nore than \$600 per perso	on?
□ No	s. Fill in the details	s for each gift.			
Gifts with a	total value of mo	re than \$600	Describe the gifts \$50.00 Monthly	Dates you gave the gifts	Value
	ole Church om You Gave the Gift		_		
4936 Inter	state 20 Frontaç reet		_		_
Willow Pa	rk TX	76087 e ZIP Code	_		
Person's rel	ationship to you C	hurch	_		
	2 years before yo charity?	ou filed for bank	ruptcy, did you give any gifts or contributions with	a total value of more tha	an \$600
☑ No	s. Fill in the details	s for each gift or	contribution.		
Part 6:	List Certain	Losses			
15. Within	1 year before you disaster, or gambl		uptcy or since you filed for bankruptcy, did you lose	anything because of the	neft, fire,
☑ No	s. Fill in the details	S.			
Part 7:	List Certain	Payments or	Transfers		
anyon	e you consulted a	bout seeking ba	uptcy, did you or anyone else acting on your behalf inkruptcy or preparing a bankruptcy petition?		
		nkruptcy petition	preparers, or credit counseling agencies for services re	equired for your bankrupt	cy.
☐ No ☑ Ye	s. Fill in the details	S.			
Steele Lav	w Firm, PLLC		Description and value of any property transferre Chapter 7 Attorney Fees	d Date payment or transfer was made	Amount of payment
3629 Love			_	08/05/2019	\$1,800.00
Number St Suite 100	treet		_		_
Fort Wort	h TX State	76107 e ZIP Code	_		
www.Stee	eleBankruptcy.co iite address	om	_		
Person Who I	Made the Payment, if N	Not You	_		

Debtor 1 Debtor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	Case	e number (if known)	
CIN Lega Person Who	I Data Services Was Paid	Description and value of any property tra Credit Report: \$66.00 Credit Counseling Course: \$24.00	ansferred Date payment or transfer was made	Amount of payment
	eywell Court Street	Financial Management Course: \$15.		
Dayton City	OH State ZIP Code	_		
www.cinl Email or web	egla.com			
Person Who	Made the Payment, if Not You	_		
	-	ruptcy, did you or anyone else acting on you I with your creditors or to make payments to		erty to
Do no	t include any payment or transfer th	nat you listed on line 16.		
☐ Y	o es. Fill in the details.			
prope Includ	erty transferred in the ordinary co le both outright transfers and transf	kruptcy, did you sell, trade, or otherwise tran purse of your business or financial affairs? ers made as security (such as granting of a sec u have already listed on this statement.		
□ No	o es. Fill in the details.			
Derrick E	vans	•	scribe any property or payments ceived or debts paid in exchange	
Person Who	Received Transfer	2004 Mazda RX-8 Ne	et: \$1,200.00	06/2019
Number S	Street	_		
Fort Wort		_		
City Person's re	State ZIP Code elationship to you NONE			
19. Within you a	n 10 years before you filed for ba	nkruptcy, did you transfer any property to a sten called asset-protection devices.)	self-settled trust or similar device	e of which

		Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales Case number (if known)						
P	art 8:	List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units						
20.	benefit, Include	year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your closed, sold, moved, or transferred? Checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage pension funds, cooperatives, associations, and other financial institutions.						
	✓ No ☐ Yes	. Fill in the details.						
21.	-	now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository Irities, cash, or other valuables?						
	✓ No ☐ Yes	. Fill in the details.						
22.	Have yo	u stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	ب	Fill in the details.						
P	art 9:	Identify Property You Hold or Control for Someone Else						
23.	-	hold or control any property that someone else owns? Include any property you borrowed from, are storing for, in trust for someone.						
	✓ No ☐ Yes	. Fill in the details.						
Р	art 10:	Give Details About Environmental Information						
For	the purp	ose of Part 10, the following definitions apply:						
	hazardou	nental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of s or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, statutes or regulations controlling the cleanup of these substances, wastes, or material.						
		ns any location, facility, or property as defined under any environmental law, whether you now own, operate, or or used to own, operate, or utilize it, including disposal sites.						
	_	es material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic e, hazardous material, pollutant, contaminant, or similar item.						
Rej	oort all no	tices, releases, and proceedings that you know about, regardless of when they occurred.						
24.	Has any law?	governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental						
0.	ш	Fill in the details.						
25.	☑ No	u notified any governmental unit of any release of hazardous material? Fill in the details.						

Debtor 1 Debtor 2		Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	c	ase number (if known)
26.	Have y orders	ou been a party in any judicial or administra	ative proceeding under any en	vironmental law? Include settlements and
	✓ No ☐ Ye	s. Fill in the details.		
P	art 11:	Give Details About Your Busines	s or Connections to Any	Business
27.	Within busine	4 years before you filed for bankruptcy, did ss?	I you own a business or have a	any of the following connections to any
		A sole proprietor or self-employed in a trade A member of a limited liability company (LLC A partner in a partnership An officer, director, or managing executive of An owner of at least 5% of the voting or equ	C) or limited liability partnership (of a corporation	
	سنا	. None of the above applies. Go to Part 12. s. Check all that apply above and fill in the de	etails below for each business.	
28.		2 years before you filed for bankruptcy, did ncial institutions, creditors, or other parties		t to anyone about your business? Include
	□ No □ Ye	s. Fill in the details below.		
P	art 12:	Sign Below		
tha pro	t answer	the answers on this Statement of Financial is are true and correct. I understand that m fraud in connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3571.	aking a false statement, conce	ealing property, or obtaining money or
			(/s/ Jennifer Ann Clinksca	
	_	yle Clinkscales, Debtor 1	Jennifer Ann Clinkscales, Deb	otor 2
	Date _	08/21/2019	Date08/21/2019	
	•	ach additional pages to Your Statement of F	inancial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?
	No Yes			
Dic	l you pay	or agree to pay someone who is not an att	torney to help you fill out bank	ruptcy forms?
	No Yes. Na	ame of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:						
Debtor 1	<u>Jeffrey</u>	Kyle	Clinkscales			
	First Name	Middle Name	Last Name			
Debtor 2	Jennifer	Ann	Clinkscales			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS						
Case number (if known)						
(II KNOWN)						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D),
fill in the information below.

Identify the cre	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?			Did you claim the property as exempt on Schedule C?	
Creditor's name:	Chase Mortgage		Surrender the property. Retain the property and redeem it. Retain the property and enter into a		No Yes	
Description of property securing debt:	1009 Edgewood Trail Benbrook, TX 76126		Reaffirmation Agreement. Retain the property and [explain]:			
Creditor's name:	Don Neel 2019 Ford Escape		Surrender the property. Retain the property and redeem it. Retain the property and enter into a		No Yes	
property securing debt:			Reaffirmation Agreement. Retain the property and [explain]:			
Creditor's name:	First Bank		Surrender the property. Retain the property and redeem it.		No Yes	
Description of property securing debt:	2018 Energy Saver		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:			

Debtor 1 Debtor 2		Clinkscales n Clinkscales		Case nu	ımber (if known)		
Part 2:	List Your	Unexpired Personal Pro	ор	erty Leases			
fill in the i	nformation belo	w. Do not list real estate leas	ses	in Schedule G: Executory Contra Unexpired leases are leases tha erty lease if the trustee does not a	t are still in effe	ect; t	he lease period has not
Desc	ribe your unexp	red personal property leases	S			Will	this lease be assumed?
	erty:	Yes Companies EXP2 Ke Mobile Home Lot Lease w	ey I	LC			No Yes
		ry, I declare that I have indica is subject to an unexpired lea		d my intention about any property e.	of my estate th	nat se	ecures a debt and
	frey Kyle Clink Kyle Clinkscales		-	s/ Jennifer Ann Clinkscales Jennifer Ann Clinkscales, Debtor 2			
-	08/21/2019 MM / DD / YYYY	_	[Date <u>08/21/2019</u> MM / DD / YYYY			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

+		filing fee administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

		filing fee administrative fee	
-	\$310	total fee	

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Ba$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

In re	Jeffrey Kyle Clinkscales	Case No.	
	Jennifer Ann Clinkscales		
		Chanter	,

	Chapter <u>7</u>
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept
	Prior to the filing of this statement I have received
	Balance Due
2.	The source of the compensation paid to me was: Debtor Other (specify)
3.	The source of compensation to be paid to me is: Debtor Other (specify)
4.	✓ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030	(Form	2030)	(12/15)
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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

> /s/ Lindsay D Steele 08/21/2019

Date Lindsay D Steele Bar No. 24070673

Steele Law Firm, PLLC 3629 Lovell Avenue Suite 100

Fort Worth, TX 76107

Phone: (682) 231-0909 / Fax: (866) 292-2348

/s/ Jeffrey Kyle Clinkscales	/s/ Jennifer Ann Clinkscales
Jeffrey Kyle Clinkscales	Jennifer Ann Clinkscales

Jeffrey Kyle Clinkscales

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Jeffrey Kyle Clinkscales
Jennifer Ann Clinkscales

CASE NO

Jennifer Ann Clinkscales

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	•	e attached l	ist of creditors is true and correct to the best of his/her
know	ledge.		
5 .	8/21/2019	0: .	/a/ Jeffray Kyla Clinkagalag
Date	0/21/2019		/s/ Jeffrey Kyle Clinkscales Jeffrey Kyle Clinkscales
Date	8/21/2019	Signature	/s/ Jennifer Ann Clinkscales

American Honda Finance Credit One Bank Attn: Bankruptcy PO Box 168088 Irving, TX 75016

ATTN: Bankruptcy Department 141 Feedlot Road PO Box 98873 Aledo, TX 76008 PO Box 98873 Las Vegas, NV 89193

Jennifer Ann Clinkscales

Bank of America Attn: Bankruptcy
PO Box 982238 El Paso, TX 79998

PO Box 1088 Arlington, TX 76004

Credit Systems International, I:Justice Finance Compan Attn: Bankruptcy Po Box 3970 PO Box 1088 Dallas, TX 75208 Dallas, TX 75208

Cavalry Portfolio Services Diversified Consultants, Inc. Kohls/Capital One ATTN: Bankruptcy Department Attn: Bankruptcy Kohls Card Support 500 Summit Lake Ste 400 PO Box 679543 PO Box 3120 Valhalla, NY 10595 Dallas, TX 75267 Milwaukee, WI 5320

Kohls Card Support/Bankruptcy PO Box 3120 Milwaukee, WI 53201

Chase Card Services Attn: Bankruptcy PO Box 15298 Wilmington, DE 19850

Don Neel Don Neel 1001 Willow Way Benbrook, TX 76126

Linebarger Goggan Blair & Samps 2323 Bryan Street, Suite 1600 Dallas. TX 75201

PO Box 24696 Columbus, OH 43224

Chase Mortgage First Bank LVNV Funding/Resu Attn: Bankruptcy Dept 520 W. Summit Hill Drive Attn: Bankruptcy Suite 801 Knoxville, TN. 37902

LVNV Funding/Resurgent Capital PO Box 10497 Greenville, SC 29603

Comenity Bank/Buckle I C System Inc Midland Funding
Attn: Bankruptcy Attn: Bankruptcy Attn: Michae Young
PO Box 182125 PO Box 64378 PO Box 460568
Columbus, OH 43218 St Paul, MN 55164 Houston, TX 77056

Commonwealth Financial Systems I.C. System, Inc. Attn: Bankruptcy 444 Highway 96 East 245 Main Street PO Box 64378 245 Main Street PO Box 64378

Dickson City, PA 18519 St. Paul, MN 55164

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108

Conn's HomePlus Attn: Bankruptcy Dept PO Box 2358 Beaumont, TX 77704

Internal Revenue Service National Credit Systems, Inc. Special Procedures-Insolvency Attn: Bankruptcy P.O. Box 7346 Philadelphia, PA 19101-7346 Atlanta, GA 31131

PO Box 312125

Credit First National Associati Jeffrey Kyle Clinkscales Portfolio Recovery Attn: Bankruptcy 141 Feedlot Road Attn: Bankruptcy Attn: Bankruptcy PO Box 81315 Cleveland, OH 44181

141 Feedlot Road Aledo, TX 76008

120 Corporate Blvd Norfold, VA 23502

Pro Collect, Inc Attn: Bankruptcy 12170 N Abrams Road, Ste 100 Fort Worth, TX 76196 Dallas, TX 75243

Tarrant Countys Cu 200 Taylor St Ste 215

Springleaf Financial S TXU/Texas Energy 4608 Bryant Irvin Rd Ste 411 Attn: Bankruptcy Fort Worth, TX 76132 PO Box 650393

Dallas, TX 75265

Steele Law Firm, PLLC 3629 Lovell Avenue Suite 100

United Revenue Corp. 204 Billings Street Suite 120 Fort Worth, TX 76107 Arlington, TX 76010

Syncb/hhgreg Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

United States Trustee 1100 Commerce Street Room 976

Syncb/NewEgg Attn: Bankruptcy PO Box 965060 Orlando, FL 32896 Wells Fargo Bank MAC F823F-02F PO Box 10438 Des Moines, IA 50306

Syncb/Rooms To Go Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

Wells Fargo Bank NA Attn: Bankruptcy 1 Home Campus MAC X2303-01A Des Moines, IA 50328

Synchrony Bank Attn: Bankruptcy Dept Attn: Bankruptcy PO Box 965060 PO Box 29704 Orlando, FL 32896

Wells Fargo Home Equity Phoenix, AZ 85038

Orlando, FL 32896

Synchrony Bank/Amazon Yes Companies EXP2 Key LLC Attn: Bankruptcy 1900 16th Street 950 PO Box 965060 Denver, CO 80202

Synerprise Consulting Services, Attn: Bankruptcy 5651 Broadmoor Mission, KS 66202

				_	
Fill in this in	nformation to i	dentify your cas	se:		e box only as directed in t in Form 122A-1Supp:
Debtor 1	Jeffrey	Kyle	Clinkscales	_	
	First Name	Middle Name	Last Name		no presumption of abuse.
ebtor 2 Spouse, if filing	Jennifer g) First Name	Ann Middle Name	Clinkscales Last Name		ulation to determine if a presump applies will be made under Chap
		NODTUEDN	DISTRICT OF TEVAS		est Calculation (Official Form 122
	sankruptcy Court to	or the: NORTHERN	DISTRICT OF TEXAS		ns Test does not apply now beca
ase number known)				of qualific	ed military service but it could ap
				☐ Check if the	his is an amended filing
ficial Forr	m 122A-1				
		f Your Currer	nt Monthly Income		
art 1: C	alculate Your	Current Monthly	Income		
What is you	ır marital and filin	g status? Check on	e only.		
☐ Not ma	arried. Fill out Colu	umn A, lines 2-11.			
✓ Marrie	d and your spous	e is filing with you.	Fill out both Columns A and B, I	ines 2-11.	
☐ Marrie	d and your spous	e is NOT filing with	you. You and your spouse are) :	
	ving in the same	household and are ı	not legally separated. Fill out be	oth Columns A and	d B, lines 2-11.
de	eclare under penalt	y of perjury that you	and your spouse are legally sepa	arated under nonba	lumn B. By checking this box, yo ankruptcy law that applies or that quirements. 11 U.S.C. § 707(b)(7
bankruptcy August 31. in the result	case. 11 U.S.C. If the amount of you Do not include an	§ 101(10A). For exa our monthly income v ny income amount mo		ber 15, the 6-mont ne income for all 6 oth spouses own t	th period would be March 1 throug months and divide the total by 6. he same rental property, put the
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse
		os, bonuses, overtin	ne, and commissions	\$4,385.98	\$0.00
		ayments. Do not inc	lude payments from a spouse	\$0.00	\$0.00
expenses of	f you or your dep		y paid for household child support. Include	\$0.00	\$0.00

on line 3.

a spouse only if Column B is not filled in. Do not include payments you listed

	otor 1 otor 2	Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales	i		c	ase number (if k	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spous	e
5.	Net in	come from operating a busine	ess, profession, o	r farm				
			Debtor 1	Debtor 2				
	Gross deduc	receipts (before all tions)	\$0.00	\$0.00				
	Ordina expen	ry and necessary operating -	\$0.00	\$0.00	0			
		onthly income from a business, sion, or farm	\$0.00	\$0.00	Copy here ->	\$0.00	\$0.00	
6.	Net in	come from rental and other re	al property					
			Debtor 1	Debtor 2				
	Gross deduc	receipts (before all tions)	\$0.00	\$0.00				
	Ordina expen	ry and necessary operating — ses	\$0.00	\$0.00	Сору			
		onthly income from rental or eal property	\$0.00	\$0.00		\$0.00	\$0.00	
7.	Intere	st, dividends, and royalties				\$0.00	\$0.00	
8.	Unem	ployment compensation				\$0.00	\$0.00	
	Do not benefi	enter the amount if you content under the Social Security Act.	d that the amount Instead, list it here	received was a e:				
	Foi	· you		\$0.0	00			
	Foi	your spouse		\$0.0	00			
9.		on or retirement income. Do not benefit under the Social Securit	•	ount received that		\$0.00	\$0.00	
10.	amour or pay or inte	ne from all other sources not lint. Do not include any benefits a ments received as a victim of a roational or domestic terrorism. The page and put the total below	received under the war crime, a crime If necessary, list of	Social Security A against humanity	ct ',			
	Total a	amounts from separate pages, i	f any.		 		+	
11.	Calcu Add lir	late your total current monthlynes 2 through 10 for each colum	y income. nn.			\$4,385.98	+ \$0.00	= \$4,385.98
		add the total for Column A to the		3.	Ĺ			Total current
								monthly income

Debtor 1 Debtor 2		Jeffrey Kyle Clinkscales Jennifer Ann Clinkscales		Case number (if known)		
P	art 2:	Determine Whether the Means 1	Test Applies to You			
12.	Calcu	ulate your current monthly income for the your	ear. Follow these steps:			
	12a.	Copy your total current monthly income from	line 11	Copy line 11 here 😝 12a.	\$4,385.98	
		Multiply by 12 (the number of months in a year	ar).		X 12	
	12b.	The result is your annual income for this part	of the form.	12b.	\$52,631.76	
13.	Calcu	ulate the median family income that applies	to you. Follow these steps:			
	Fill in	the state in which you live.	Texas]		
	Fill in	the number of people in your household.	3]		
	Fill in	the median family income for your state and s	size of household		\$72,271.00	
		d a list of applicable median income amounts ctions for this form. This list may also be avai		•		
14.	How	do the lines compare?				
	14a.	Line 12b is less than or equal to line 13. Go to Part 3.	. On the top of page 1, check	box 1, There is no presumption of abuse.		
	14b.	Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	op of page 1, check box 2, The	e presumption of abuse is determined by F	form 122A-2.	
P	art 3:	Sign Below				
	Bys	signing here, I declare under penalty of perjury	that the information on this st	atement and in any attachments is true an	d correct.	
		/s/ Jeffrey Kyle Clinkscales Jeffrey Kyle Clinkscales, Debtor 1		Jennifer Ann Clinkscales nifer Ann Clinkscales, Debtor 2		
	[Date 8/21/2019 MM / DD / YYYY	Date	8/21/2019 MM / DD / YYYY		
				ואוואו / טט / זזזז		
	it yo	ou checked line 14a, do NOT fill out or file Forr	TI 122A-2.			

If you checked line 14b, fill out Form 122A-2 and file it with this form.